DEVELOPMENT AND VALIDATION OF NEW RP-HPLC METHOD FOR THE SIMULTANEOUS ESTIMATION OF PROGUANIL AND ATOVAQUONE IN PHARMACEUTICAL DOSAGE FORM

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ABSTRACT

The aim of the study was to develop and validate a rapid, sensitive and accurate method for simultaneous estimation of proguanil and atovaquone in Pharmaceutical dosage forms by liquid chromatography. The chromatographic separation was achieved on Kromasil C18 (4.6 x 150 mm; 5 μ m) at ambient temperature. The separation was achieved by employing a mobile phase consists of Phosphate buffer: acetonitrile (50:50 v/v). The flow rate was 1.0ml/ minute and ultra violet detector at 287nm. The retention time for proguanil and atovaquone found to be 2.15 min and 2.48 min respectively. The proposed method was validated for selectivity, precision, linearity and accuracy. All the results obtained from various validation parameters were within the acceptable range. The method was found to be linear from concentrations of 25-150 µg/ml for proguanil and 62.5 - 375 µg/ml for atovaquone.

Keywords: Proguanil, Atovaquone, Isocratic and RP-HPLC

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INTRODUCTION

Proguanil (Wangboonskul *et al.*, 1993; Hussein *et al.*, 1996) is chemically (1E)-1-[amino-(4-chloroanilino)methylidene]-2-propan-2-ylguanidine [Fig:1] which is an anti-malarial drug used in combination with atovaquone or chloroquine to treat malaria and have been linked to serum enzyme elevations during therapy. It is a biguanide derivative that is converted to an active metabolite called cycloguanil. It exerts its antimalarial action by inhibiting parasitic dihydrofolatereductase enzyme. Upon hydrolysis, proguanil is converted to its active cyclic triazine metabolite, cycloguanil, by a cytochrome P450 dependent reaction. Cycloguanil selectively inhibits the bifunctionaldihydrofolatereductase-thymidylate synthase (DHFR-TS) of plasmodium parasite, thereby disrupting deoxythymidylate synthesis and ultimately blocking DNA and protein synthesis in the parasite.



Figure 1: Chemical structure of proguanil

Atavaquone (Helsby *et al.*, 1993; Gemma *et al.*, 2013) [Fig: 2] is chemically trans-2-[4-(4-chlorophenyl)cyclohexyl]-3-hydroxy-1,4-naphthalenedione. Atovaquone selectively inhibits the malarial cytochrome bc_1 complex in the parasitic electron transport chain, collapsing the mitochondrial membrane potential.



Figure 2: Chemical structure of atovaquone

(As per the available literature, HPLC methods have been reported for determination of proguanil (Satish *et al.*, 2009; and Nathalie *et al.*, 2006; Adewuyi *et al.*, 2010; Nandini and Seema 2013; Nandini and Seema 2013; Sompon and Pratt, 1995; Benjamin *et al.*, 2005) and atovaquone (Sanjay *et al.*, 2009; Allison *et al.*, 2017; Satish *et al.*, 2009; Viplava and HarithaPavani, 2012; Santosh *et al.*, 2018; Varsha *et al.*, 2013; Kalpesh *et al.*, 2010; Srujani *et al.*, 2015) in single pharmaceutical dosage forms and biological samples and few methods (Veer *et al.*, 2012; Lakshmana *et al.*, 2017; Lindegardh *et al.*, 2005; Naresh *et al.*, 2014; Nitin and Lalitha, 2014; Patil *et al.*, 2016; Naazneen and Sridevi 2017; Bhavyasri *et al.*, 2013; Julius *et al.*, 2009; Patil *et al.*, 2013; and Sahoo *et al.*, 2012) have been reported for the simultaneous determination of proguanil and atovaquone in combined dosage forms.

MATERIALS AND METHODS

Chemicals and Solvents

The reference samples of proguanil and atovaquone(API) were obtained from M/s. Mylan labs, Hyderabad, India. The branded formulation (tablets) (Malarone tablets containing proguanil and atovaquone) manufactured by M/s. GSKIndia healthcare limited, Gurgaon were procured from the local market. HPLC grade acetonitrile, potassium dihydrogen phosphate, ortho phosphoric acid were obtained from M/s. Rankem Chemicals Ltd, Mumbai, India. Milli-Q water dispensed through a 0.22 μ filter of the Milli-Q water purification system (Millipore, Merck KGaA, Darmstadt, Germany) was used throughout the study.

Preparation of phosphate buffer solution

About 1.42 gm disodium hydrogen phosphate was weighed, transferred into a 1000 mL flask and 400ml of Milli-Q water was added, then mixed well. Then volume was made up to 1000 mL, sonicated for five minutes and cooled to room temperature. The pH of above buffer solution was adjusted to 3.0 ± 0.05 with orthophosphoric acid solution and then filtered through a 0.45 µ membrane filter.

Preparation of the mobile phase

A 50:50 v/v mixture of the above phosphate buffer and acetonitrile was prepared and used as the mobile phase in the study.

The diluent

A 50:50 v/v mixture of methanol and acetonitrile was prepared and used as the diluent for the preparation of drug dilutions.

Preparation of mixed standard solution of proguanil and atovaquone

About 100 mg of proguanil and 250 mg of atovaquone were accurately weighed and transferred into a 50 mL clean dry volumetric flask containing 30 mL of the diluent. The solution was sonicated for 10 min and then volume was made up to the mark with a further quantity of the diluent to get a concentration of 2 mg/mL proguanil and 5 mg/mL atovaquone (Stock solution). A mixed working standard solution was

further prepared by diluting the above stock solution to obtain a concentration of 200 μ g/mL of proguanil and 500 μ g/mL of atovaquone.

Preparation of the tablet solution

Twenty tablets of the commercial sample of "Malarone" were weighed and finely powdered. An accurately weighed portion of powdered sample equivalent to 100 mg of proguanil and 250 mg of atovaquone was transferred into a 50 mL volumetric flask containing 30 mL of the diluent. The contents of the flask were sonicated for about 10 min for complete solubility of the drugs and the volume made up with a further quantity of the diluent. Then, this mixture was filtered through a 0.45 μ membrane filter. Further, 1 mL of the above filtrate was pipetted into a 10 mL volumetric flask and the volume was made up with the diluent.

RESULTS AND DISSCUSION

Method Development

After several initial trails with mixtures of methanol, water, Acetonitrile and buffer in various combinations and proportions, a trail with a mobile phase mixture of phosphate buffer: acetonitrile (50:50 %v/v). at flow rate was 1.0 mL/ minute brought sharp peaks. The optimized chromatographic conditions used were shown in Table 1. The chromatogram was shown in Fig 3. The retention times obtained under the optimized conditions were 2.15 min for proguanil and 2.48 min for atovaquone.



Figure 3: Chromatogram of standard solution of proguanil and atovaquone

Table	1:	Optimized	chromatographic	conditions	for	simultaneous	estimation	of	proguanil	and
atovac	lnoi	ne.								

Column	:	Kromasil C18 (4.6 x 150 mm; 5 µm)
Elution mode	:	Isocratic
Mobile phase	:	Phosphate buffer: acetonitrile (50:50 v/v)
Column Temp	:	$30^{\circ} \mathrm{C}$
Wavelength	:	287 nm
Injection Volume	:	10 μL
Flow rate	:	1 mL/min
Run time	:	6 min

Linearity:

Linearity was studied by analyzing five standard solutions covering the range of 25-150 μ g/mL for proguanil and 62.5-375 μ g/mL for atovaquone. Calibration curve with concentration verses peak areas was plotted by injecting the above prepared solutions and the obtained data were subjected to regression analysis using the least squares method. (Tables 2 & 3) (Figures 4 & 5).

Table 2: Linearity data of proguanil and atovaquone

Proguanil		Atovaquone		
Concentration Mean Peak area		Concentration	Mean Peak area	
(µg/ml)	(n=3)	(µg/ml)	(n=3)	
25	57689	62.5	198563	
50	114524	125	388425	
75	172989	187.5	595305	
100	235848	250	797212	
125	288159	312.5	997584	
150	346272	375	1189564	

Table 3: Analytical	performance	parameters of	proguanil a	and atovaq	uone

Parameters	Proguanil	Atovaquone
Slope (m)	2316.2	3192.9
Intercept (c)	87.73	3996.7
Correlation coefficient (R2)	0.999	0.999



Figure 4: Calibration curve of proguanil

Accuracy

The accuracy of the method was determined by calculating the recoveries of proguanil and atovaquone by analyzing solutions containing approximately 50%, 100% and 150% of the working strength of proguanil and atovaquone (Table 4).



Figure 5: Calibration curve of atovaquone

Preanalysed a	mount (µg/ml)	Spiked Amount (µg/ml)		% Recovered	
Proguanil	Atovaquone	Proguanil	Atovaquone	Proguanil	Atovaquone
50	125	25	62.5	99.77	99.79
50	125	25	62.5	99.75	99.84
50	125	25	62.5	99.76	99.67
50	125	50	125	99.86	99.52
50	125	50	125	99.84	99.66
50	125	50	125	99.79	99.75
50	125	75	187.5	99.06	99.71
50	125	75	187.5	99.11	99.65
50	125	75	187.5	99.15	99.72
			MEAN	99.56	99.70
			SD	0.346	0.092
			%RSD	0.35	0.09

Table 4: Accuracy (recovery) data

Precision

The precision of an analytical procedure expresses the closeness of agreement (degree of scatter) between a series of measurements obtained from multiple sampling of the same homogeneous sample under the prescribed conditions. Precision was determined as repeatability and intermediate precision, in accordance with ICH guidelines. The repeatability and intermediate precision were determined by analyzing the samples of proguanil and atovaquone. The repeatability and intermediate precision data were assessed by the use of standard solutions of proguanil and atovaquone and are summarized in Table 7 and 8 respectively.

Repeatability:

Six replicate injections of proguanil and atovaquone were analyzed on the same day for assessing repeatability. The % RSD for proguanil and atovaquone were found to be 0.27 and 0.06 respectively. These values were found to be within acceptable limit of ≤ 2 and hence, the method is reproducible. The corresponding results are shown in the Table 5.

	Proguanil			Atovaquone				
S. No.	Area	USP Plate Count	USP Tailing	Area	USP Plate Count	USP Tailing		
1	234847	7528	1.11	797232	6907	1.07		
2	236511	7317	1.13	796975	7122	1.04		
3	234925	7231	1.09	795987	6959	1.06		
4	235391	7289	1.10	796947	7126	1.08		
5	235768	7344	1.05	797045	7132	1.10		
6	235001	7399	1.06	797144	7034	1.04		
MEAN	235407.16			796888.33				
SD	641.8			454.17				
% RSD	0.27			0.06				

Table 5: Results of repeatability of proguanil and atovaquone

Intermediate Precision:

Six replicate injections of the same dilution were analyzed on two different days by different analyst for verifying the variation in the precision. The % RSD of the results for proguanil and atovaquone were found to be 0.38 and 0.09 respectively, which are within acceptable limit of ≤ 2 . Hence, the method is reproducible on different days. This indicates that the method is precise. The results are shown in the Table 6a and 6b.

S. No.	Average area	USP Plate	USP
	(n=6)	Count	Tailing
Day 1	235103.66	7388	1.08
Day 2	235104.66	7412	1.10
Overall average	235102.66		
SD	896.07		
% RSD	0.38		

Table 6a: Results of Intermediate Precision of proguanil

Table 6b: Results of Intermediate Precision of atovaquone

S. No.	Average area	USP Plate	USP
	(n=6)	Count	Tailing
Day 1	796794.0	7032	1.05
Day 2	796792.0	7001	1.02
Overall average	796793.0		
SD	682.0		
% RSD	0.09		

Robustness

As part of the Robustness, deliberate change in the Flow rate, Mobile Phase composition, Temperature Variation was made to evaluate the impact on the method (Table 7&8).

Condition	Mean area	% assay	% difference
optimised	234910	99.07	
Flow rate at 0.9 mL/min	223557	99.15	0.08
Flow rate at 1.1 mL/min	235623	99.34	0.27
Mobile phase:			
Buffer-Acetonitrile(55:45)	234648	99.02	0.05
Buffer-Acetonitrile(45:55)	225885	98.97	0.1
Column Temperature:			
at 25°C	245678	98.79	0.28
at 35°C	235321	99.21	0.14

Table 7: Robustness study for proguanil

Table 8: Robustness study for atovaquone

Condition	Mean area	% assay	% difference
optimised	793832	99.81	
Flow rate at 0.9 mL/min	797671	100.03	0.22
Flow rate at 1.1 mL/min	786588	99.97	0.16
Mobile phase:			
Buffer-Acetonitrile(55:45)	789671	100.07	0.26
Buffer-Acetonitrile(45:55)	793588	99.89	0.08
Column Temperature:			
at 25°C	797348	99.95	0.14
at 35°C	784598	99.77	0.04

Limit of Detection (LOC) and Limit of Quantification (LOQ):

LOD and LOQ values for proguanil were 1.10 and 3.33 μ g/ml respectively and those for atovaquone were 0.88 and 2.65 μ g/ml respectively. The lowest values of LOD and LOQ as obtained by the proposed method indicate that the method is sensitive.

Stability of the formulation solution:

The sample solution injected after 24 h by keeping at room temperature (30°C) did not show any appreciable change. The deviation in the assay was not more than 2 and the results are shown in Table 9.

Table 9: Stability data of proguanil and atovaquone

Drug	%Assay at 0 h*	%Assay at 24 h*	Deviation
proguanil	99.65	98.89	0.76
atovaquone	100.12	99.78	0.34

*n=6 for each parameter

CONCLUSION

In the present study, a new simple, precise and accurate HPLC method was developed and validated for the simultaneous estimation of proguanil and atovaquone in combined tablet dosage form. In this method, a Kromasil C18 (4.6 x 150 mm; 5 μ m) was selected as the stationary phase. A 50:50% v/v mixture of phosphate buffer and acetonitrile was used as the mobile phase at a flow rate of 1.0 mL/min. Under the optimized conditions, the retention times obtained for proguanil and atovaquone were 2.15 and 2.48 min

respectively. The method was validated as per the ICH guidelines. In this method, the number of theoretical plates is above 2000, tailing factor is less than 2 and RSD of peak area is less than 2 which indicates that the optimized method met the limits of system suitability parameters. The linearity ranges obtained for the drugs are sacubitril and valsartan shows in 25-150 µg/mL and 62.5-375 µg/mL respectively. The percent mean recovery values of proguanil and atovaquone were found to be 99.56 & 99.70 respectively and it showed that the proposed method is accurate. RSD values of repeatability and intermediate precision were ≤ 2 and hence the method is precise. The lowest values of LOD and LOQ as obtained by the proposed HPLC method indicate that the method is sensitive. The solution stability studies of method indicate that proguanil and atovaquone were stable up to 24 h. Chromatographic conditions were deliberately changed slightly to check the robustness of the method and the results showed the reliability of the method as no appreciable changes in the results were observed.

The proposed method has specific merits over the earlier reported methods. Both the drugs were eluted with a simple mobile phase with good resolution. The retention times of the drugs obtained in this method were short. The short run time shows the speed of analysis which enables more number of samples to be analyzed per unit time. The linearity range for both drugs obtained at lowest concentrations with least LOD & LOQ values were found by proposed method than the reported methods. The proposed RP-HPLC method is sensitive, robust, precise and accurate and can be used for routine quality control analysis for simultaneous determination of proguanil and atovaquone in their tablet dosage forms.

REFERENCES

Adewuyi GO, Olubomehin O, Ayanniyi AW (2010). High performance liquid chromatographic determination of proguanil after derivatisation with sodium benzoxazole-2-sulphonate. *African Journal of Biotechnology*, **9** 900-905.

Allison B. Chambliss, Teresa L. Parsons, Mark A. Marzinke (2017). An ultraperformance LC-MS/MS Method for the quantification of the antimalarial atovaquone in plasma, LC-MS/MS Quantification of ATQ; 1 400-409.

Benjamin UE, Obiageri OO, Oluseye OB, Festus AO (2005). Sensitive high performance liquid chromatographic method for the determination of proguanil and its metabolites, cycloguanil and 4-chlorophenyl biguanide in biological fluids. *African Journal of Biotechnology* **4** 856-861.

Bhavyasri K, MuraliBalaram V, Nageswarao R, Rambabu D, Ajitha M (2013). RP-UPLC method development and validation for the simultaneous estimation of proguanil and atovaquone in pharmaceutical dosage form. *Journal of Chemical and Pharmaceutical Research*, **5** 1222-1229.

Gemma L Nixon, Darren M Moss, Alison E Shone, David G. Lalloo (2013). Nicholas Fisher, Paul M Neill, Stephen A Ward, Giancarlo A Biagini, Antimalarial pharmacology and therapeutics of atovaquone, *Journal of Antimicrobial Chemotherapy*, **68** 977–985.

Helsby NA, Edwards G, Breckenridge AM, Ward SA (1993). The multiple dose pharmacokinetics of proguanil. *Brazilian Journal of Clinical Pharmacology*, **35** 653-656.

Hussein Z, Eaves CJ, Hutchinson DB, Canfield CJ (1996). Population pharmacokinetics of proguanil in patients with acute *P. fulciparurn* malaria after combined therapy with atovaquone. *Brazilian Journal of Clinical Pharmacology*, **42** 589-597.

Julius OS, Adebusuyi AA, Cyprian OO (2009). A rapid and sensitive HPLC method for the analysis of progunail and cycloguanil in plasma: application to single dose pharmacokinetic studies, *JPRHC* 1 2-24.

Kalpesh N Patel, Jayvadan K Patel, Manish P Patel, Ganesh C Rajput (2010). A validated method for development of atovaquone as API and tablet dosage forms by UV spectroscopy. *Pharm Methods*, 1 61-64.

LakshmanaRao A, Prasanthi T, Fazeela T (2017). Development and validation for simultaneous estimation of proguanil and atovaquone by using RP-HPLC. *International Journal of Analytical Techniques*, **3** 1-10.

Lindegardh N, Blessborn D, Bergqvist Y (2005). Simultaneous quantitation of the highly lipophilic atovaquone and hydrophilic strong basic proguanil and its metabolites using a new mixed-mode SPE approach and steep-gradient lc. *Journal of Chromatographic Science*, **43** 1-8.

Naazneen S, Sridevi A (2017). Stability indicating RP-HPLC method for the simultaneous estimation of atovaquone and proguanil in bulk and tablet dosage form. *World journal of Pharmacy and Pharmaceutical Sciences*, **6** 199-210.

Nandini RP, Seema SS (2013). Development and validation of new RP-HPLC method for determining impurity profiling in proguanil hydrochloride drug as well as it is tablet dosage form. *Der PharmaChemica*, 5 11-19.

Nandini RP, Seema SS (2013). Development and validation of stability-indicating RP-HPLC method for estimation of proguanilHCl in tablet dosage form. *Journal of Current Chemical and Pharmaceutical Sciences*, **3** 206-217.

Naresh B, Swapnil JD, Raghavendra S, Prashant BM (2014). New liquid chromatographic method for simultaneous quantification of atovaquone and proguanil with its active metabolite cycloguanil in human plasma.*Indian Journal of Pharmaceutical Education and Research*, **48** 83-93.

Nathalie L Leveque, William N Charman, Francis CK Chiu (2006). Sensitive method for the quantitative determination of proguanil and its metabolites in rat blood and plasma by liquid chromatography–mass spectrometry. *Journal of Chromatography B*, 830 314-321.

Nitin SJ, Lalitha KG (2014). Spectroscopic method development and validation for simultaneous estimation of atovaquone and aproguanil in tablet dosage form. *World journal of Pharmacy and Pharmaceutical Sciences*, **3** 1994.

Patil RN, Kalyan PP, Mangesh H, Govind S (2016). A validated stability indicating RP-HPLC method development for simultaneous determination of atovaquone and proguanil in pharmaceutical formulation. *World journal of Pharmacy and Pharmaceutical Sciences*, **5** 1264-1274.

Patil SD, Kokatea SD, Mohitea SK, Magduma CS (2013). Development and validation of RP-HPLC method on progunail and Atovaquone in bulk and tablet dosage form. *Current Pharma Research*, **4** 1093-1096.

Sahoo S, Panda PK, Mishra SK (2012). HPLC method development for simultaneous estimation of Proguanil and Atovaquone in tablet dosage form, *International Journal of Pharmacy and Pharmaceutical Sciences*, **4** 195-197.

Sanjay Gurule, DipanjanGoswami, Arshad H. Khuroo, TausifMonif (2009). LC-APCI mass spectrometric method development and validation for the determination of atovaquone in human plasma. *Biomedical chromatography*, **24** 497-505.

Santosh V. Gandhi, Priyanka S. Ghone, Atul P. Chaudhari (2018). HPTLC Method Development and Validation for Estimation of Atovaquone as a Bulk and in Pharmaceutical Dosage form. *Pharmaceutical Resonance*, **1** 17- 20.

Satish GP, Ketan KN, Ajit MP, Uttam DP, Kiran VM (2009). Determination of atovaquone in human plasma by LC-MS-MS and its application to a bioequivalence study. *Chromatographia*, 70 947–951.

Satish GP, Ketan KN, Ajit MP, UttamDP, Kiran VM (2009). Alternative LC–MS/MS Method for Simultaneous Determination of Proguanil, Its Active Metabolite in Human Plasma and Application to a Bioequivalence Study. *Chromatographia*, **70** 1095-1102.

SomponWanwimolruk, Emma L. Pratt (1995). A Simple HPLC Assay for Proguanil and Its Active Metabolite Cycloguanil: Application to Oxidation Phenotyping, *Journal of liquid chromatography*, **18** 4097-4105.

SrujaniCh, Satish V, Adam Khan P (2015). UV-spectrophotometric method for the estimation of atovaquone in bulk and pharmaceutical dosage form using hydrotropic solubilization technique, *International Journal of Pharmaceutical and Chemical Sciences*, **4** 501-506.

Varsha HC, Ajit AP, Kulkarni CG, Burade KB (2013). Development & evaluation of spectrophotometric method forthe estimation of atovaquone in pharmaceutical dosage form, *International Journal of Pharmaceutical Sciences and Research*, **4** 3965-3970.

Veer VS, Badgujar MA, Kiran VM (2012). Simultaneous determination of atovaquone and proguanil hydrochloride in tablet dosage form by high performance liquid chromatography. *Research Journal of Pharmaceutical, Biological And Chemical Sciences*, **3** 377-383.

Viplava K, HarithaPavani V (2012). Development and validation of stability-indicating RP-HPLC method for estimation of atovaquone. *International Journal of Pharmaceutical and Clinical Research*, 4:68-72.

Wangboonskul J, White NJ, Nosten F, terKuile F, Moody RR, Taylor RB (1993). Single dose pharmacokinetics of proguanil and its metabolites in pregnancy. *European Journal of Clinical Pharmacology*, **44** 247-51.