RP-HPLC Method for Simultaneous Estimation of Ceftriaxone and Sulbatam in Parenteral Preparation

J. Dharuman*, M. Vasudevan†, K.N. Somasekaran‡,
B. Dhandapani and Prashant D. Ghode
Department of Pharmaceutical Analysis, K.M.C.H. College of Pharmacy,
Kovai Estate, Kalapatti Road, Coimbatore-641 035, India
E-mail: dharumanj@yahoo.com; dhandapanitrx@gmail.com

A simple reverse phase liquid chromatographic method has been developed and subsequently validated for simultaneous determination of ceftriaxone and sulbactam in parenteral preparation. The separation was carried out using a mobile phase consisting of phosphate buffer pH 3.5 adjusted with ortho phosphoric acid and acetonitrile (35:65). The column used was Kromasil C_8, 5 µ, 15 cm × 4.6 mm id with flow rate of 1 mL/min using PDA detection at 215 nm. The described method was linear over a concentration range of 50-250 and 100-500 µg/mL for the assay of sulbactam and ceftriaxone, respectively. Ibuprofen (50 µg/mL) was used as internal standard. The retention times of sulbactam, ceftriaxone and ibuprofen were found to be 2.3, 4.2 and 5.1 min, respectively. Results of analysis were validated statistically and by recovery studies. The limit of quantification (LOQ) for ceftriaxone and sulbactam were found to be 20 and 10 µg/mL, respectively. The results of the study showed that the proposed RP-HPLC method is simple, rapid, precise and accurate, which is useful for the routine determination of ceftriaxone and sulbactam bulk drug and in its pharmaceutical dosage form.

Key Words: RP-HPLC, Sulbactam, Ceftriaxone, Ibuprofen.

INTRODUCTION

Chemically, ceftriaxone (CFT) is (6R,7R)-7[[(2Z)-(2-amino-4-thiazolyl) (methoxyamino)acetyl]amino]-8-oxo-3-[[1,2,5,6-tetrahydro-2-methyl-5,6-dioxo-1,2,4-triazin-3-yl)-thio]methyl]-5-thia-1-azabicyclo[4.2.0]oct-2-ene-2-carboxylic acid[1]. It is a third generation broad spectrum cephalosporin for parenteral administration used as a bactericidal and mainly used in the treatment of various bacterial infections caused by Gram-positive and Gram-negative microorganisms[2,3]. Sulbactam[4] (SBM) chemically is penicillanic acid sulphone with glactamase inhibitory properties. It generally has only weak antibacterial activity, except against *N. gonorrhoea* and *N. meningitides* but it is an irreversible inhibitor of several *p*-lactamases[1,2].

†Roxanne Research Laboratory Limited, Taramani, Chennai- 600 013, India.

‡School of Chemical and Biotechnology, SASTRA University, Thanjavur-613 402, India.

Sulbactam may therefore enhance the activity of many *p*-lactam antibiotics against bacteria that are normally resistant because of the production of *p*-lactamases, such as *Staphylococci* sp., *N. gonorrhoea* and some enterobacteriaceae[5].

Cefriaxone official in USB, BP and not present in IP. The USP[6] and BP[7] described HPLC method for estimation of ceftriaxone. The literature survey revealed that HPTLC[8], HPLC[9] and spectrophotmetric methods[10] reported for its determination. There is no report available for the simultaneous estimation of ceftriaxone and sulbactam in combined dosage form. This paper describes validated RP-HPLC for simultaneous estimation of ceftriaxone and sulbactam in combination using phosphate buffer pH 3.5 adjusted with ortho phosphoric acid and acetonitrile (35:65). The column used was Kromasil C_8, 5 μ, 15 cm × 4.6 mm id with flow rate of 1 mL/min using PDA detection at 215 nm.

EXPERIMENTAL

Standard bulk drug sample sulbactam, ceftriaxone and ibuprofen were provided by Micro Laboratories Ltd., Bangalore. Parenteral preparations in combined dosage form were procured from the local market.

All other reagents used were of HPLC grade. HPLC (Shimadzu LC-20AT) method was developed using Kromasi C_8, 5 μ, 15 cm × 4.6 mm id. Mobile phase selected for this method using combination of phosphate buffer pH 3.5 adjusted with ortho phosphoric acid and acetonitrile (35:65) acid that was filtered through 0.45 μ membrane filter. The column used was Kromasil C_8, 5 μ, 15 cm × 4.6 mm id with flow rate of 1 mL/min using PDA detection at 215 nm.

Method was developed using ibuprofen as internal standard. Standard stock solutions of pure drugs were made separately in mobile phase containing 50-250 and 100-500 μg/mL for the assay of sulbactam and ceftriaxone and 50 μg/mL of ibuprofen and filtered through a 0.45 μ membrane filter. A volume of 20 mL of each sample was injected into column. All measurements were repeated six times for each concentration and the peak area and retention time was recorded. Mean retention times of sulbactam, ceftriaxone and ibuprofen were found to be 2.3, 4.2 and 5.1 min, respectively. The calibration curve was constructed by plotting peak area ratio of analytes to internal standard *versus* the corresponding drug concentration (Table-1).

Analysis of formulation: Weight equivalent to 100 mg/mL of sample was transferred to a 100 mL volumetric flask. It was dissolved in the mobile phase and filtered through a membrane filter (0.45 μ). The sample solution was suitably diluted and used for the analysis. After setting the chromatographic conditions and stabilizing the instrument to obtain a steady baseline, the sample solution was loaded in the 20 μL fixed-sample loop of the injection port. The solution was injected and a chromato-gram was recorded. The injections were repeated six times and the peak areas were recorded. A representative chromatogram has been given in Fig. 1. The peak area ratios of each of the drugs to the internal standard were calculated and the amount

TABLE-1
PEAK AREAS OF CALIBRATION CURVE

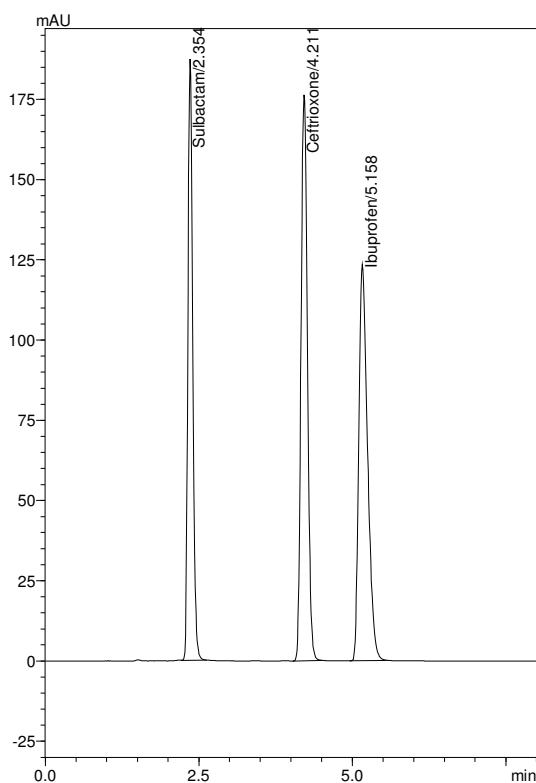| Internal standard peak area (µg mL^{-1})	Ceftrioxone			Sulbactam		
	Concentration (µg mL^{-1})	Peak area	Response factor	Concentration (µg mL^{-1})	Peak area	Response factor
	50	20427	0.082	25	47463	0.192
	100	40855	0.165	50	94980	0.384
246810	200	81728	0.331	100	189910	0.769
	300	122582	0.496	150	284810	1.153
	400	163493	0.662	200	379692	1.538
	500	204302	0.827	250	474802	1.923

Fig. 1. RP-HPLC Chromatogram of tablet sample with internal standard (SBM, CFT and IS)

of each drug present per formulation was estimated from the respective calibration curves. The result of analysis reported in Table-2. The stability of the sample in mobile phase was analyzed after 24 h; it was found no change in analytical parameters. In RP-HPLC method, system suitability (Table-3) was applied to a representative chromatograph to check various parameters such as efficiency, resolution and peak tailing which was found to be complying with BP requirements[11].

TABLE-2
ANALYSIS OF FORMULATIONS

Drugs	Labelled amount (mg)	Amount taken for assay (µg/mL)	Amount found (mg)	% Label claim
Sulbactam	500	75	74.98 ± 1.888	99.97
Ceftrioxone	1000	150	149.66 ± 2.678	99.97

TABLE-3
RECOVERY STUDIES

Drugs	Label claim (mg)	Fortified amount (mg)	Recovery (%)
Ceftrioxone	500	150	99.96 ± 0.768
Sulbactam	1000	300	100.52 ± 0.620

Recovery studies: Recovery studies were carried out by adding known quantities of standard at different levels to the pre-analyzed sample to study the linearity, accuracy and precision of the proposed methods. The recovery studies also reveals whether there is a positive or negative influence on the quantification parameters by the additives usually present in dosage forms.

RESULTS AND DISCUSSION

The developed RP-HPLC method for the simultaneous estimation of ceftriaxone and sulbactam from combined dosage form utilizing phosphate buffer pH 3.5 adjusted with orthophosphoric acid and acetonitrile (35:65). Detection of eluent was carried out using PDA detector at 215 nm. The method was developed using ibuprofen as internal standard. The run time per sample is just 6 min. The excipients in the

TABLE-4
SYSTEM SUITABILITY AND VALIDATION PARAMETERS

Validation parameters	Sulbactam	Ceftrioxone
Linearity range (µg/mL)	50-250	100-500
r	0.9997	0.9994
LOD (ng/mL)	10	20
LOQ (ng/mL)	50	100
Intra day (% RSD)	0.718	0.915
Inter day (% RSD)	0.381	0.261
Repeatability (% RSD)	0.435	0.253
Recovery (%)	99.96	100.52
Peak purity index	1.0000	1.0000
Resolution factor (Rs)	-	5.383
Asymmetry factor (A_s)	0.95	0.95
No. of theoretical plates (N)	6952	6671
Capacity factor (k')	1.207	2.301
High equivalent to theoretical plates (HETP)	21.575	22.482
Tailing factor	1.227	1.323
Selectivity factor (α)	3.639	3.639

formulation did not interfere in the accurate estimation of ceftriaxone and sulbactam. The method was validated as per ICH guidelines in terms of linearity, accuracy, specificity, intraday and interday precision, repeatability of measurement of peak area as well as repeatability of sample application and the results are shown in Table-4. Since none of the methods is reported for simultaneous estimation of ceftriaxone and sulbactam from combined dosage form, this developed method can be used for routine analysis of two components in parenteral formulation.

REFERENCES

1. S. Budavari, The Merck Index, Merck and Co., Whitehouse Station, NJ, edn. 13, p. 335 (2001).
2. L. Mishra, Drug Today, Lorina Publications, Inc, Vol. 2, No. 4, p. 231 (2003).
3. L. Mishra, Drug Today, Lorina Publications, Inc, Vol. 2, No. 4, p. 233 (2003).
4. A.J. Shah, M.W. Adlard and J.D. Stride, *J. Pharm. Biomed. Anal.*, **8**, 437 (1990).
5. J.D. Williams, *Drugs*, **35**, 11 (1998).
6. The United State of Pharmacopoeia 26th Revision, U.S. Pharmacopoeial Convention, Inc., Rockville, M.D., p. 386 (2003).
7. The British Pharmacopoeia, Her Majesti's Stationary Office, London, Vol. 1, p. 329 (2000).
8. J.S. Erica and D. Agbaba, *J. Pharm. Biomed. Anal.*, **18**, 893 (1998).
9. S. Joshi, *J. Pharm. Biomed. Anal.*, **28**, 795 (2002).
10. I.F. Al-Momani, *J. Pharm. Biomed. Anal.*, **25**, 751 (2001).
11. Anonymous, in British Pharmacopoeia, Her Majesty's Stationary Office, Cambridge, UK (2001).

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Contact:
105062, Moscow, P.O.B. 105
E-mail: iwaconference@sibico.com
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