DESIGN AND EVALUATION OF GLICLAZIDE CR TABLETS EMPLOYING CALCIUM STARCH – A NEW STARCH BASED POLYMER

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ABSTRACT

The objective of the present investigation is to synthesize calcium starch, a new starch based polymer and to evaluate its application in controlled release (CR) and in the design of gliclazide controlled release tablets. Calcium starch polymer was synthesized by gelatinization of starch in the presence of sodium hydroxide and cross linking by treatment with calcium chloride. Matrix tablets each containing 30 mg of gliclazide were formulated employing calcium starch polymer in different proportions of drug and polymer and the tablets were evaluated. Gliclazide release from the formulated tablets was slow and spread over 24 h and depend on percent polymer in the tablet. Non – Fickian diffusion was the drug release mechanism from the formulated tablets. Gliclazide release from matrix tablets F3 formulated employing 5 % calcium starch was similar to that from Diamicron MR Tablets, a commercial sustained release formulation of gliclazide. Calcium starch polymer was found suitable for the design of oral controlled release tablets of gliclazide.

Key words: Calcium starch, Controlled release, Gliclazide, Matrix tablets.

INTRODUCTION

In the last two decades, controlled – release dosage forms have made significant progress in terms of clinical efficacy and patient compliance. Drug release from the systems should be at a desired rate, predictable and reproducible. Polymers, which are used as release – retarding materials in the design of controlled – release dosage forms play a vital role in controlling the delivery of drug from these dosage forms. Though a wide range of polymers and other release – retarding materials are available, there is a continued need to develop new, safe and effective release – retarding polymers for controlled release. Starch is a natural, biodegradable polymer and modified starches are reported as fillers, disintegrants and dry binders. In the present study a new starch – based polymer, calcium

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starch was synthesized and evaluated for its application in controlled release. Among the various approaches, preparation of drug – embedded matrix tablet is one of the least complicated approach for obtaining controlled release. Gliclazide containing matrix tablets were prepared employing calcium starch and evaluated for controlled release (CR) and to design gliclazide CR tablets. Gliclazide is an effective oral anti – diabetic agent that belongs to the sulfonylureas drug class. The recommended daily dosage of gliclazide is 30 – 120 mg in divided doses 2 to 3 times a day. The drug causes gastro intestinal disturbances such as gastric pain, constipation, nausea and vomiting, if present in larger concentration in g. i. act. Controlled release formulation is needed\(^3\) for gliclazide for better control of blood glucose levels to prevent hypoglycemia and enhance clinical efficacy to reduce g. i. disturbances and to enhance patient compliance. A few controlled release formulations of gliclazide are available commercially.

**EXPERIMENTAL**

**Materials and methods**

**Materials**

Gliclazide is a gift sample from M/s. Ranbaxy Research Labs., Gurgaon, Haryana. All other materials used were of Pharmacopoeial grade.

**Methods**

**Preparation of calcium starch polymer**

Potato starch (5 parts) was dispersed in purified water (50 parts) to form starch slurry. Sodium hydroxide (3 parts) was dissolved in water (30 parts) and the solution was added to starch slurry, while mixing. Mixing was continued for 30 minutes to form a thick gelatinized mass. The mass formed was added to 300 mL of calcium chloride (20 % w/v) solution contained in a vessel while stirring at 1000 rpm with a medium duty stirrer. The stirring was continued for 1 hour to precipitate calcium starch formed. The calcium starch formed was collected by vacuum filtration, washed repeatedly with water and dried at 80\(^0\)C. The dried polymer was powdered and passed through mesh No. 100.

**Preparation of tablets**

Matrix tablets each containing 30 mg of gliclazide were prepared employing calcium starch in different proportions of drug and polymer. The required quantities of medicament and matrix materials were mixed thoroughly in a mortar by following geometric dilution technique. The binder solution (mixture of alcohol and purified water at
1 : 1 ratio) was added and mixed thoroughly to form dough mass. The mass was passed through mesh No. 12 to obtain wet granules. The wet granules were dried at 60°C for 2 h. The dried granules were passed through mesh No. 16 to break the aggregates. The lubricants, talc (2%) and magnesium stearate (2%) were passed through mesh No. 100 onto dry granules and blended in a closed polyethylene bag. The tablet granules were compressed into tablets on a rotary multi-station tablet punching machine (Cadmach Machinery Co. Pvt. Ltd., Mumbai) to a hardness of 8 - 10 kg/sq.cm. using 9 mm round and flat punches.

Hardness of tablets was tested using a Monsanto hardness tester. Friability of tablets was determined in a Roche friabilator. Disintegration time was determined in a Thermonic Tablet Disintegration Test Machine using water, 0.1N HCl and phosphate buffer of pH 7.4 as test fluids.

**Estimation of gliclazide**

Gliclazide content of the tablets was estimated by UV spectrophotometric method based on the measurement of absorbance at 229 nm in phosphate buffer of pH 7.4. The method was validated for linearity, precision and accuracy. The method obeyed Beer’s law in the concentration range 0-10 µg/mL. When a standard drug solution was assayed repeatedly (n = 6), the mean error (accuracy) and relative standard deviation (precision) were found to be 0.6 and 0.8 %, respectively. No interference from the excipients used was observed.

**Drug release study**

Drug release from matrix tablets was studied using 8 station dissolution rate test apparatus (Lab India, Disso 2000) employing a paddle stirrer at 50 rpm and at 37±1°C. Phosphate buffer of pH 7.4 (900 mL) was used as dissolution fluid. Samples of 5 mL of each were withdrawn at different time intervals over a period of 24 h. Each sample withdrawn was replaced with an equal amount of fresh dissolution medium. Samples were suitably diluted and assayed at 229 nm for gliclazide using a Shimadzu UV-150 double beam UV-spectrophotometer. For comparison, gliclazide release from Diamicron MR and Glizid MR tablets was also studied. The drug release experiments were conducted in triplicate.

**Data analysis**

Release data were analyzed as per zero order, first order, Higuchi and Peppas models to assess the drug release kinetics and mechanism from tablets.
RESULTS AND DISCUSSION

Calcium starch was synthesized by gelatinizing potato starch in the presence of sodium hydroxide and cross linking by treatment with calcium chloride. The calcium starch polymer formed was found to be fine and free flowing powder upon drying. It was insoluble in water, aqueous fluids of acidic and alkaline pHs. When tested for melting point, the polymer charred at 220°C.

Matrix tablets each containing 30 mg of gliclazide could be prepared employing different proportions (1, 2, 5 and 10 % concentrations in the formulae) of calcium starch polymer by conventional wet granulation method. Hardness of the tablets was in the range of 8 – 10 kg/ sq. cm. Weight loss in the friability test was less than 0.4% in all the cases. All the matrix tablets prepared contained gliclazide within 100 ± 3% of the labeled claim. All the tablets were found to be non – disintegrating in water and aqueous acidic (pH 1.2) and alkaline (pH 7.4) fluids. As such the prepared tablets were of good quality with regard to drug content, hardness and friability. As the tablets formulated employing calcium starch were non – disintegrating in acidic and alkaline fluids, they are considered suitable for oral controlled release.

Release parameters of the tablets are summarized in Table 1. Gliclazide release from the prepared tablets was slow and spread over 24 h and depend on the concentration of calcium starch polymer. When the release data were analyzed as per zero and first order kinetic models, it was observed that both the models are equally applicable to describe the release data. The correlation coefficient (r) values in both the models are nearly the same. When the release data were analyzed as per Peppas equation, the release exponent ‘n’ was found in the range 0.548 - 0.751 indicating non – Fickian (anomalous) diffusion as the release mechanism from all the matrix tablets prepared and commercial. Plots of percent released versus square root of time were found to be linear (r > 0.8805) with all tablets prepared indicating that the drug release from the tablets was diffusion controlled.
Table 1: Gliclazide release characteristics of matrix tablets formulated employing calcium starch polymer

<table>
<thead>
<tr>
<th>Formulation</th>
<th>Polymer concentration (%)</th>
<th>Percent drug released at various times (h)</th>
<th>T50 (h)</th>
<th>T90 (h)</th>
<th>K0 (mg/h)</th>
<th>K1 (h-1)</th>
<th>‘n’ in Peppas equation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>1</td>
<td>4</td>
<td>8</td>
<td>16</td>
<td>24</td>
<td></td>
</tr>
<tr>
<td>F1</td>
<td>1</td>
<td>17.52</td>
<td>56.66</td>
<td>80.16</td>
<td>92.7</td>
<td>97.2</td>
<td>3.6</td>
</tr>
<tr>
<td>F2</td>
<td>2</td>
<td>22.09</td>
<td>42.34</td>
<td>80.93</td>
<td>94.13</td>
<td>98.15</td>
<td>4.6</td>
</tr>
<tr>
<td>F3</td>
<td>5</td>
<td>18.16</td>
<td>31.92</td>
<td>51.16</td>
<td>97.5</td>
<td>100</td>
<td>7.8</td>
</tr>
<tr>
<td>F4</td>
<td>10</td>
<td>8.82</td>
<td>27.84</td>
<td>48.72</td>
<td>57.3</td>
<td>64.8</td>
<td>8.5</td>
</tr>
<tr>
<td>Glizid MR tablets</td>
<td>-</td>
<td>10.5</td>
<td>21.78</td>
<td>35.04</td>
<td>61.8</td>
<td>75.6</td>
<td>12.9</td>
</tr>
<tr>
<td>Diamicron MR tablets</td>
<td>-</td>
<td>15.7</td>
<td>34.2</td>
<td>52.31</td>
<td>79.9</td>
<td>96.26</td>
<td>7.5</td>
</tr>
</tbody>
</table>
As the polymer concentration was increased, release rate was decreased. Good linear relationships were observed between percent polymer and release rate, $K_0$ and $K_1$ (Fig. 1 and 2). Thus, drug release from the matrix tablets could be controlled by varying the proportion of drug and polymer in the matrix.

Fig. 1: Relationship between percent polymer and release rate ($K_0$) of gliclazide matrix tablets formulated employing calcium starch.

Fig. 2: Relationship between percent polymer and release rate ($K_1$) of gliclazide matrix tablets formulated employing calcium starch.
For comparison, gliclazide release from commercial controlled release tablets was also studied. Drug release profiles of formulation F3 and Diamicron MR tablets were compared by calculating difference factor $f_1$ and similarity factor $f_2$. A value of $f_1 < 15$ and $f_2 > 50$ indicates similarity of the two drug release profiles. The values of $f_1$ and $f_2$ were found to be 9.46 and 176.0, respectively for the comparison of release profiles of formulation F3 and Diamicron MR tablets indicating that the release profiles of these two products are similar. Hence, matrix tablets formulated employing calcium starch (F3) are considered suitable for controlled release of gliclazide over 24 h.

CONCLUSIONS

(i) Matrix tablets formulated employing calcium starch, a new starch based polymer are suitable for oral controlled release of gliclazide.

(ii) Gliclazide release from the formulated tablets was slow and spread over 24 h and depend on percent polymer in the tablet. Non – Fickian diffusion was the drug release mechanism from the formulated tablets.

(iii) Gliclazide release from matrix tablets F3 formulated employing 5 % calcium starch was similar to that from Diamicron MR tablets, a commercial controlled release formulation of gliclazide.

(iv) Calcium starch polymer is suitable for the design of oral controlled release tablets.

REFERENCES


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