

ACAIJ, 14(12) 2014 [456-461]

## Micro-determination of isoxsuprine hydrochloride in pharmaceutical formulations and urine samples

Sabry Khalil<sup>1,2</sup>

<sup>1</sup>Medical Laboratories Department, College of Applied Medical Sciences, Taif University, Taif 21944, P. O. Box 2425, (KSA) <sup>2</sup>Chemistry Department, Faculty of Science, Fayoum University, Fayoum, (EGYPT) E -mail: SabryKhalil1963@gmail.com

## ABSTRACT

A new method was given for the determination of Isoxsuprine drug in pure solutions, in pharmaceutical formulations and urine samples using atomic emission and atomic absorption spectrometry. Ion - associate complexes of Isoxsuprine hydrochloride with [zink(II), cobalt(II) thiocyanate], potassium ferricyanide and ammonium reineckate were precipitated and the excess unreacted metal complex was determined. The drug can be determined by the affort method in the range  $0.36 - 54.25 \ \mu g \ mL^{-1}$ .

© 2014 Trade Science Inc. - INDIA

#### **INTRODUCTION**

Isoxsuprine hydrochloride (ISX) is chemically known as 4-hydroxy-[1-[(1-methyl-2-phenoxyethyl) amino] ethyl] benzenemethanol hydrochloride (Figure 1). It is used in the treatment of cerebral and peripheral vascular disease, and to arrest premature labor<sup>[1]</sup>. The official method<sup>[2]</sup> recommends UV-spectrophotometric measurement of aqueous solution of ISX while the British Pharmacopoeia<sup>[3]</sup> recommends a visual nonaqueous method. Ultra-violet spectrophotometry,[4-8] simple kinetic spectrophotometry,<sup>[9,10]</sup> fluorimetry,<sup>[11]</sup> chemiluminescence spectrometry,<sup>[12]</sup> ion-selective electrode-based potentiometry,<sup>[13]</sup> polarography,<sup>[14]</sup> HPLC,<sup>[15–17]</sup> gas chromatography,<sup>[18]</sup> liquid chromatography-mass spectrophotometry,<sup>[19]</sup> gas chromatography-mass spectrophotometry<sup>[20]</sup> and affinity chromatography<sup>[21]</sup> have been employed for determining ISX in pharmaceutical dosage forms. Many of these techniques are deficient in simplicity, cost-effectiveness and easy access.

Isoxsuprine is a very important pharmaceutical compound. Therefore, we found it important to prepare new ion-associates containing this drug and to study and elucidate their chemical structures. Also the work present a new rapid method for the determination of this drug after transformation into the ion-associates.

The use of simpler, faster, less expensive and sensitive method is desirable.

Although, Inductively Coupled Plasma-Atomic Emission Spectrometry (ICP-AES) and Atomic Absorption Spectrometry (AAS) are rapid methods and have a very low detection limits which can not be reached by most of other methods. The present study includes new ICP-AES and AAS methods for the determination of the investigated drug. The method is based on the precipitating the ion-associates formed as a result of the combination of this drug with an excess of

## KEYWORDS

Atomic emission; Atomic absorption; Ion-associate complexes; Pharmaceutical analysis.

# - Full Paper





 $[Zn(SCN)_4]^{2-}$ ,  $[Co(SCN)_4]^{2-}$ ,  $[Fe(CN)_6]^{3-}$  and  $[Cr(NH_3)_2(SCN)_4]^{1-}$ . The equilibrium concentration of the metal ion present as the soluble inorganic complex ion in the supernatant solution was determined using atomic emission and absorption.

## MATERIALS AND METHODS

Doubly-distilled water and analytical grade reagents were used in the preparation of all solutions. Isoxsuprine was obtained from Sigma Chemical Co. USA. Duvadilan tablets containing (10 mg Isoxsuprine hydrochloride / tablet) as pharmaceutical produuct of Solvay, India and Myprox tablets containing (20 mg Isoxsuprine hydrochloride / tablet) manufactured by Vista Pharmaceuticals, Limited, Solitaire, India were purchased from local market. Zinc(II) sulfate, cobalt(II)chloride, potassium thiocyanate, potassium ferricyanide and ammonium reineckate were from BDH Chemicals (UK).

## Apparatus

The pH of the solutions was measured using an Orion Research Model 701A digital pH-meter. Induc-

tively coupled plasma atomic emission measurements were carried out using ICPE- 9000 ShimaIspu plasma atomic emission spectrometer and atomic absorption measurements were made on AA-6650 ShimaIspu atomic absorption spectrophotometer. Conductimetric measurements were carried out using conductivity measuring bridge type M.C.3 model EBB/10 ( $K_{cell} = 1$ ); [Chertsey, Surry, England]. The IR absorption spectra were obtained by applying the KBr disk technique using a Pye Unicam SP-300 infrared spectrometer.

## Preparation of the standard solutions

Standard solutions of zinc, chromium and cobalt were prepared by weighing 1.0 g of a high-purity sample (chromium shot, zinc and cobalt metals, respectively), transferring it to a 1-liter measuring flask and then adding 50 ml of concentrated HNO<sub>3</sub>. After complete dissolution, the solution was filled to the mark with distilled water. The 1000  $\mu$ g mL-1 solution was stored in plastic bottles which had been presoaked in dilute HNO<sub>3</sub>. The solutions were stable for approximately one year. Standard solution of iron was obtained from Aldrich.

## **Emission and absorption measurements**

Analytical Parameters for the Measurement of Zn,Cr, Co and Fe Using ICP-AES are listed in TABLE 1. Using AAS the Co (II) was measured at wavelength 240.7 nm, slit 0.2 nm, relative noise 1.0, sensitivity 0.018  $\mu$ g mL<sup>-1</sup>and linear range 1.0  $\mu$ g mL<sup>-1</sup> and Zn(II) was measured at wavelength\_213.9 nm, slit 0.7 nm, relative noise 1.0, sensitivity 0.018  $\mu$ g mL<sup>-1</sup>and linear range 1.0  $\mu$ g mL<sup>-1</sup> and linear range 1.0  $\mu$ g mL<sup>-1</sup> and linear range 1.0  $\mu$ g mL<sup>-1</sup> and linear range 1.0  $\mu$ g mL<sup>-1</sup>. The instruments were equally adequate for present purposes and were used according to availability. The atomic spectrometry was calibrated as in the previously reported work<sup>[22-24]</sup>.

## Determination of solubility of the ion – associates

The solid ion-associate was added in excess to a solution of the optimum pH and ionic strength. The solution was shaken for 4-6 hours and left to stand for a weak to attain equilibrium. Then the saturated solution was filtered into a dry beaker (rejecting the first few ml of filtrate). The equilibrium concentration of the metal ion present in the form of a soluble inorganic complex was measured using atomic spectrometry. Hence, the solubility (S) of the precipitate was evaluated, from which

Analytical CHEMISTRY An Indian Journal

TABL	E 1 : Analytic	al parameter	s for the emissio	on measuremer	nt of Cr, Zn, Co a	and Fe Using	ICP-AES
, I	Wavelength		Plasma	DL	LDR	BEC	RSD x BEC
Element	( <b>nm</b> )	Order	position	(mg/L)	(mg/L)	(mg)	(%)
Cr	267.71	84	0	0.01	0.1-1000	0.4	7 x 0.7
Zn	206.20	109	0	0.01	0.1-1000	0.3	10 x 0.9
Co	236.37	95	0	0.02	0.2-1000	0.8	1 x 0.7
Fe	248.30	90	0	0.01	0.1-1000	0.2	1 x 0.7

Note. DL, detection limit; LDR, linear dynamic range; BEC, background equivalent concentration; RSD, relative standard deviation. For all elements: state, ion; entrance slits, 50 x 300 µm; exit slits, 100 x 300 µm

the solubility product of the ion-associate was calculated.

#### **Conductometric measurements**

Paper

The stoichiometry of the ion-associates was elucidated also by conductometric titrations<sup>[25]</sup> of the drugs with  $[Zn(SCN)_{4}]^{2-}$ ,  $[Co(SCN)_{4}]^{2-}$ ,  $[Fe(CN)_{6}]^{3-}$  and  $[Cr(NH_2)_2(SCN)_4]^{1-}$  solutions.

## Analytical determination of isoxsuprine in aqueous solutions

Aliquots (0.03 - 4.5 mL) of 0.001 mol L<sup>-1</sup> drug solutions were quantitatively transferred to 25 mL volumetric flasks. To each flask 1.0 mL of 0.01 mol L<sup>-1</sup> standard solution of  $[Zn(SCN)_4]^2$ ,  $[Co(SCN)_4]^2$ ,  $[Fe(CN)_{4}]^{3-}$  and  $[Cr(NH_{2})_{2}(SCN)_{4}]^{1-}$  was added and the volume was completed to the mark with the aqueous solutions of the optimum pH and ionic strength (prepared from HCl and NaOH). The solutions were shaken well and left to stand for 15 min then filtered through Whatman P/S paper (12.5 cm). The equilibrium metal ion concentration in the filtrate was determined using ICP-AES or AAS. The consumed metal ion (Zn, Cr, Co or Fe) in the formation of ion-associates was calcu-

Analytical CHEMISTRY An Indian Journal

lated, and the drug concentration was determined indirectly.

## Analytical determination of isoxsuprine in pharmaceutical preparations and urine samples

The Isoxsuprine - containing pharmaceutical preparations (Duvadilan 10 mg and Myprox 20 mg tablets) were successfully assayed using the present method. Sampling were made by grinding (20 and 10 tablets), respectively then taking 1.75 - 45.25 and 4.25 - 49.50  $\mu$ g/ml of Duvadilan 10 mg and Myprox 20 mg tablets, respectively. Urine samples were obtained from 25 patients after 4-8 hours of taking dose. In all cases the tablets and urine samples were analyzed at the optimum condition solution applying the above described procedure.

#### **RESULTS AND DISCUSSION**

The results of elemental analysis (TABLE 2) of the produced solid ion associates reveal that two Isoxsuprineinium cations form ion associates with one  $[Zn(SCN)_4]^{2-}$  or  $[Co(SCN)_4]^{2-}$  and three  $[Fe(CN)_6]^{3-}$ , while only one isoxsuprinium cation combines with

Ion-associate composition	m. p. <sup>0</sup> c	Molar ratio	Color	% Fou	nd ( calcula ( Zn, Cr, 0	ted)CHN Co or Fe)	Metal
$(C_{18} H_{23} NO_3)_2 [Zn(SCN)_4]$	246	2:1	white	45.44 (45.41)	4.35 (4.32)	7.95 (7.89)	6.18 (6.13)
$(C_{18} H_{23} NO_3)_2 [Co (SCN)_4]$	325	2:1	blue	45.80 (45.76)	4.39 (4.33)	8.01 (7.96)	5.44 (5.39)
(C <sub>18</sub> H <sub>23</sub> NO <sub>3</sub> ) [ Cr (NH <sub>3</sub> ) <sub>2</sub> (SCN) <sub>4</sub> ]	342	1:1	pink	37.84 (37.79)	4.16 (4.11)	14.05 (14.01)	7.45 (7.39)
$(C_{18} H_{23} NO_3)_3 [Fe (CN)_0]$	380	3:1	brown	53.32 (53.29)	1.70 ( 1.67)	9.33 (9.26)	4.15 (4.11)

TABLE 2 : Elemental analysis, composition and some physical properties of Isoxsuprine ion - associates

458

Full

 $[Cr(NH_3)_2(SCN)_4]^{1-}$  to form a 1:1 ion associate. These results are comparable to the previously reported results<sup>[26-28]</sup>.

Conductometric titrations of the investigated inorganic complexes with Isp HCl were performed to give insight into the stoichiometric compositions of the ionassociates formed in solutions. In case of ion associates with  $[Zn(SCN)_4]^{2-}$  or  $[Co(SCN)_4]^{2-}$ , the characteristic curves break at a molecular ratio ([Isp] / [x]<sup>n-</sup>) TABLE 3 : Solubility and solubility product of Isoxsuprine ion-associates at their optimum conditions of pH and ionic strength ( $\mu$ ) values ate 25° C

Isp- Ion – associate	pH	μ p <sup>s</sup>	pk sp
$(C_{18} H_{23} NO_3)_2 [Zn (SCN)_4]$	5.0 0.7	10.20	29.99
$(C_{18} H_{23} NO_3)_2 [Co (SCN )_4]$	6.00.6	10.14	29.84
$(C_{18} H_{23} NO_3) [Cr (NH_3)_2 (SCN)_4]$	3.0 0.5	11.61	23.88
(C18 H23 NO3) 3[Fe(CN)6]	4.0 0.6	9.36	36.03

 $p^s$  : -log solubility;  $p^k_{sp}$  : -log solubility product

 TABLE 4 : Determination of Isoxsuprine in aqueous solutions, pharmaceutical preparations and urine samples by ICP-AES and AAS

Sample	Amount taken (ug)	Mean recovery	Mean RSD
Using [ Zn (SCN) <sub>4</sub> ] <sup>2-*</sup>	, \r\ <b>8</b> /		
Pure Isp solution	0.36 - 54.25	99.96	0.7
Duvadilan tablets <sup>a</sup> (10 mg Isp / tablet )	1.75 - 45.25	99.93	0.6
Myprox tablets <sup>b</sup> ( 20 mg Isp / tablet )	4.25 - 49.50	99.94	0.7
Urine after 4 hs	16.35 - 47.25	99.92	0.6
Urine after 8 hs	28.25 - 46.50	99.96	0.5
Using [ Co(SCN) <sub>4</sub> ] <sup>2-**</sup>			
Pure Isp solution	0.36 - 54.25	99.95	0.5
Duvadilan tablets <sup>a</sup> (10 mg Isp / tablet )	1.75 - 45.25	99.94	0.6
Myprox tablets <sup>b</sup> ( 20 mg Isp / tablet )	4.25 - 49.50	99.93	0.7
Urine after 4 hs	16.35 - 47.25	99.92	0.5
Urine after 8 hs	28.25 - 46.50	99.98	0.5
Using [ Zn(SCN) <sub>4</sub> ] <sup>2-**</sup>			-
Pure Isp solution	0.36 - 54.25	98.96	0.7
Duvadilan tablets <sup>a</sup> (10 mg Isp / tablet )	1.75 - 45.25	98.94	0.5
Myprox tablets <sup>b</sup> ( 20 mg Isp / tablet )	4.25 - 49.50	98.95	0.6
Urine after 4 hs	16.35 - 47.25	98.93	0.5
Urine after 8 hs	28.25 - 46.50	98.92	0.5
Using [ Cr (NH <sub>3</sub> ) <sub>2</sub> (SCN) <sub>4</sub> ] <sup>1-*</sup>			
Pure Isp solution	0.36 - 54.25	99.72	0.5
Duvadilan tablets <sup>a</sup> (10 mg Isp / tablet )	1.75 - 45.25	99.65	0.6
Myprox tablets <sup>b</sup> ( 20 mg Isp / tablet )	4.25 - 49.50	99.83	0.7
Urine after 4 hs	16.35 - 47.25	99.74	0.5
Urine after 8 hs	28.25 - 46.50	99.86	0.6
Using [ Fe(CN) <sub>6</sub> ] <sup>3.*</sup>			
Pure Isp solution	0.36 - 54.25	100.06	0.5
Duvadilan tablets <sup>a</sup> (10 mg Isp / tablet )	1.75 - 45.25	100.07	0.6
Myprox tablets <sup>b</sup> ( 20 mg Isp / tablet )	4.25 - 49.50	100.05	0.7
Urine after 4 hs	16.35 - 47.25	100.06	0.5
Urine after 8 hs	28.25 - 46.50	100.08	0.6

RSD : Relative Standard Deviation (sex determinations) \* By ICP-AES \*\* By AAS; a Solvay Pharmaceuticals, Co., India; b Vista Pharmaceuticals, Limited, Solitaire, India



# Full Paper

of about 2, confirming the formation of 2:1 (Isp :  $x^{2-}$ ) ion associates but in the case of the reineckate anion where the curve exhibits a sharp break at the 1:1 molecular ratio and in the case of  $[Fe(CN)_6]^{3-}$  anion the curve exhibits a sharp break at the 3 :1 molecular ratio. The results obtained coincide with the elemental analysis of the precipitated ion- associates.

The optimum pH and ionic strength values (TABLE 3) have been elucidated by determining the solubility of the ion-associates in HCl-NaOH solutions of different pH values and ionic strengths. The best were those exhibiting lowest solubility values.

## Analytical determination of isoxsuprine in aqueous solutions, pharmaceutical preparations and urine samples

Isoxsuprine HCl was determined precisely and accurately in aqueous solutions at their optimum conditions of pH and ionic strength (TABLE 4), in pharmaceutical preparations and urine samples using the present method. The results given in TABLE 4 reveal that recoveries were in the range 98.92 - 100.08 %, reflecting the high accuracy in addition to the high precision indicated by the very low values of the relative standard deviation.

Generally, the present method is as good as those reported before where,  $0.36 - 54.25 \ \mu g \ mL^{-1}$  solutions of Isoxsuprine using  $[Zn(SCN)_4]^{2-}$ ,  $[Co(SCN)_4]^{2-}$ ,  $[Fe(CN)_6]^{3-}$  and  $[Cr(NH_3)_2(SCN)_4]^{1-}$  was determined, respectively, which means that this method is applicable over a wider concentration range than that of the previously reported Spectrophotometric methods,<sup>[7,8]</sup> where Isoxsuprine was determined in the ranges 20-100 and 1.4-21µg mL<sup>-1</sup>, respectively and the Simple Kinetic Spectrometric methods<sup>[9,10]</sup> in which Isoxsuprine was determined in the ranges 0.5-4 and 2-20µg mL<sup>-1</sup>, respectively.

In pharmaceutical analysis it is important to test the selectivity toward the excipiences and the fillers added to the pharmaceutical preparations. Fortunately, such materials mostly do not interfere. It is clear from the results obtained for the pharmaceutical preparations (TABLE 4) that these excipiences do not interfere.

In order to establish whether the proposed method exhibits any fixed or proportional bias, a simple linear regression<sup>[29]</sup> of observed drug concentration against

Analytical CHEMISTRY An Indian Journal the theoretical values (five points) was calculated. The student's *t-test*<sup>[29]</sup> (at 95% confidence level) was applied to the slope of the regression line which showed that it did not differ significantly from the ideal value of unity. Hence, it can be concluded that there are no systematic differences between the determination and the true concentration over a wide range. The standard deviations (SD) can be considered satisfactory at least for the level of concentrations examined.

#### CONCLUSION

The present method is as good as those reported before where, 0.36 - 54.25  $\mu$ g mL<sup>-1</sup> solution of Isoxsuprine using [Zn(SCN)<sub>4</sub>]<sup>2-</sup>, [Co(SCN)<sub>4</sub>]<sup>2-</sup>, [Fe(CN)<sub>6</sub>]<sup>3—</sup> and [Cr(NH<sub>3</sub>)<sub>2</sub>(SCN)<sub>4</sub>]<sup>1-</sup> were determined, respectively, which means that this method is applicable over a wider concentration range than that of the previously reported Spectrophotometric methods,<sup>[7,8]</sup> where Isoxsuprine was determined in the ranges 20-100 and 1.4-21 $\mu$ g mL<sup>-1</sup>, respectively and the Simple Kinetic Spectrometric methods<sup>[9,10]</sup> in which Isoxsuprine was determined in the ranges 0.5-4 and 2-20 $\mu$ g mL<sup>-1</sup>, respectively.

Although the present method is more time consuming than some other methods, it exhibits fair sensitivity and accuracy. Moreover, the reproducibility of the results is superior to those obtained with other methods.

#### ACKNOWLEDGEMENTS

The Authors wish to thank College of Applied Medical Sciences - Taif University for supporting this work.

#### REFERENCES

- [1] J.E.F.Reynolds (Ed); Martindale, The Extra Pharmacopoeia, 31st Edition, The Pharmaceutical Press, London (**1996**).
- [2] The United States Pharmacopoeia XXI, National Formulary 19, Rockville, USP Convention, USA, 577 (**1984**).
- [3] British Pharmacopoeia, Her Majesty's Stationary Office, London, 1, 321 (1988).
- [4] R.Bryant, D.E.Mantle, D.L.Timma, D.S.Yoder; J.Pharm.Sci., 57, 658 (1968).

461

- [5] D.Cevdet, G.B.Richard; Analyst, **123**, 181 (**1998**).
- [6] K.Basavaiah, K.Tharba, K.B.Vinay; Croat.Chem. Acta, 83(4), 415-420 (2010).
- [7] A.M.Sekar, A.J.Suresh, V.Niraimathi; IOSR J. of Pharmacy and Biological Sciences, 4(1), 9-12 (2012).
- [8] K.Tharba, K.Basavaiah, H.D.Revanasiddappa, K.B.Vinay; Talanta, 81, 1216-1223 (2010).
- [9] N.El-Enany, F.Belal, M.Rizk; IL Farmaco, 57(8), 641-648(2002).
- [10] N.El-Enany, F.Belal, M.Rizk; Scientia Pharmaceutica, 74, 99-119(2006).
- [11] A.A.A.Nawal; J. Pharm.Biomed.Anal. 28, 331 (2002).
- [12] F.A.Aly, A.T.Salma, J.AOAC Int. 83, 1299 (2000).
- [13] C.A.John, A.G.Constantinos, A.K.Michael; Analyst, 116, 233 (1991).
- [14] F.Belal, H.A.AL-Malaq, A.A.AL-Majed; J.Pharm.Biomed.Anal., 23, 1005 (2000).
- [15] H.Ayman, L.Benedikt; J.Chromatogr. B: Biomed. Sci.Appl., 563, 216 (1991).
- [16] F.Belal, H.A.Al-malaq, A.A.Al-Majed, E.A.Gadkariem, J.Liq; Chroma.Relat.Tech., 23, 3175 (2000).
- [17] F.Volpe, J.Zintel, D.Spiegel; J.Pharm.Sci., 68, 1264 (1979).
- [18] D.Cova, R.Colombo, G.Cellini; Pharmacology, 27, 117 (1983).

- [19] P.R.Kootstra, C.J.P.F.Kuijpers, K.L.Wubs, D.Van Doorn, S.S.Sterk, L.A.Van Ginkel, R.W.Stephany; Anal.Chim.Acta, 529, 75 (2005).
- [20] J.M.Bosken, A.F.Lehner, C.G.Hughes, W.E.Woods, F.C.Camargo, J.D.Harkins, J.Boyles, T.Tobin; J.Anal Toxicol., 28, 27 (2004).
- [21] B.Gianfranco, F.Maurizio, C.Ilenia, S.Luigi, G.Pasquale; Analyst, 123, 2693 (1998).
- [22] S. Khalil, N. Shalaby, Inter.J.Pharm.Bio Sci.,4(1), 1037-1046(2013).
- [23] S.Khalil, S.S.Al-Zahrani, Y.M.Hussein, A.I.Turkistani; Analytical Chemistry: An Indian Journal, 14(6), 201-207 (2014).
- [24] S.Khalil; Mikrochemica Acta, 130,181-185(1999).
- [25] J.J.Lingantes; Electroanalytical Chemistry, 2 nd. Edition. Interscience, New York, 90 (1958).
- [26] S.Khalil, A.Kelzieh; J.Pharm.Biomed.Anal., 27, 123 (2002).
- [27] S.Khalil, S.A.Ibrahim, F.I.Zedan, M.S.AbdEl-Monem; Chem.Anal., 50, 897-905 (2005).
- [28] S.Khalil, M.M.El-Rabiehi; J.Pharm.Biomed.Anal., 22, 7-14 (2000).
- [29] J.C.Miller, J.N.Miller; Statistics for Analytical Chemistry, Ellis Horwood, Chichester, 90 (1984), 2nd Edition, Ellis Horwood, 185 (1988).