



**FORMULATION OF SUPERSATURATED SELF-NANOEMULSIFYING DRUG  
DELIVERY SYSTEM (SEDDS) OF ALBENDAZOLE**

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### ABSTRACT

Contemporary drug pipelines are regularly exceptionally populated with inadequately water-soluble drug applicants requiring novel definition innovations to give measurement structures suitable biopharmaceutical properties. The setup of supersaturating drug conveyance frameworks (SDDS) is a promising idea to acquire sufficient oral bioavailability. SDDS contain the medication in a high energy or in any case quickly dissolving structure to such an extent that intraluminal focuses over the immersion solvency of the medication are produced. For the methodology to be valuable, the shaped supersaturated arrangement should then be settled to take into consideration critical ingestion and in the long run adequate bioavailability. The adjustment of a supersaturated arrangement can be refined by adding precipitation inhibitors which may act through an assortment of instruments. The objective of this audit is to evaluate techniques and excipients related with the advancement of SDDS and give some setting to their utilization. Furthermore, the future bearings and factors prone to add to or take away from ideal dose structure determination are evaluated. This remembers a conversation for the likely impact of the gastrointestinal physiology on the capacity to accomplish and keep up supersaturation as this data is fundamental in planning helpful definitions dependent on the supersaturating concept. To basically assess the impact of submicron and micron-sized natural particulates on the bright (UV) assimilation spectra of fluid frameworks and evaluate the appropriateness of UV/Vis fiber-optic tests for in-situ fixation checking within the sight of particles of various sizes. UV absorbance spectra were gotten for fluid felodipine suspensions containing a scope of molecule sizes (300 nm-400 μm) and suspension focuses and for methanolic arrangements of various fixations and nebulous movies of various thicknesses. Huge expansions in absorbance as an element of absolute suspension focus were noticed for nanosuspensions yet not for the other molecule sizes assessed.

**KEYWORDS:** Albendazole, SDDS, UV absorbance, gastrointestinal physiology.

### 1. INTRODUCTION

Developing an oral formulation lipophilic drugs is challenging for a formulation scientist due to poor solubility and variable oral absorption recent drug discovery efforts have resulted in molecules with high molecular weight and lipophilicity and lower aqueous solubility. Many lipophilic drugs in the drug discovery pipeline is attributed to the fact that lipophilic residue improves the receptor affinity of the drug (Vieth et al., 2004).

The process of oral absorption of a drug depends on a combination of inherent physicochemical properties of the drug like dissolution, precipitation, micellar solubilization, ionization, polymorphism and 7.1 range of physiological factors like pH, gastrointestinal transit, intestinal permeation etc. The interaction between these factors and their effect on in-vivo biopharmaceutical

performance of drugs has traditionally been ignored in pharmaceutical research. The conventional methods such as disintegration and dissolution testing used for quality control (QC) has link or no relevance to the biopharmaceutical performance of a drug.

A significant number of prescription drugs are weak bases. The weakly basic drugs for oral administration constitute 37.9% of the drugs approved by the US-FDA between 1911 to 2016. These drugs are now available as generic drugs in Indian market due to patent expiry, the encumbrance associated with drugs (weak bases) having low dissolution rate and poor aqueous solubility, can result in low and variable oral bioavailability. To improve the bio-indelibility of these compounds and there by their clinical effect. it is often necessary to use enabling formulation strategies. One such approach could be a supersaturating drug delio.

### 1.1 Try system (SDDS).

The principle of SDDS is to increase the amount of compound in solution at the absorptive site and thin increase the bioavailability.

Super-saturation is a thermodynamically meta-stable state that constitutes the driving force for precipitator. A theoretical insight into the thermodynamics of supersaturated systems will result in a better understanding of the important factors and mechanism involved in the kinetics of the precipitation. A supersaturated system has an increased chemical potential compared with the corresponding saturated or unsaturated systems. The increased chemical potential makes the system thermodynamically unstable and acts as a driving force for precipitation (Bevernagte *et al.*, 2013). It may be more efficient in promoting absorption. As super-saturation typically increases the free drug concentration, without altering the tendency of the drug to permeate into and across the epithelial monolayer. As such, the increased drug concentration is readily available for absorption. This is confirmed in studies using trans epithelial permeation of supersaturated solutions (Bevrnagte *et al.*, 2013; Yu *et al.*, 2013).

Generating super saturation can improve the solubility of drugs because drugs in a state of super saturation are kinetically soluble in solution at a concentration above their thermodynamic equilibrium solubility. Supersaturation is defined as a concentration which is higher than the equilibrium solubility of the solid form. If a supersaturated drug solution exists in the gastrointestinal lumen for a sufficient length of time to be absorbed, it may result in an enhanced flux across the intestinal wall and thus improve nonlinear absorption. Therefore, supersaturation can be used as a powerful tool to improve solubility of poorly water-soluble drugs. Several formulations that induce Supersaturation *in vitro* and enhance oral absorption *in vivo* include amorphous materials such as solid dispersion, crystalline salts, higher energy polymorphic forms and SEDDS. However, it is still difficult to evaluate quantitatively the effect of Supersaturation on the drug absorption because these formulations often increase not only the dissolved concentration but also the dissolution rate of drugs (Yamashita *et al.*, 2010). The extent of Supersaturation strongly depends on physicochemical properties of drug. Understanding the *in vitro* kinetics of drug Nano-precipitation using bio relevant media can be exploited to bring predictability to oral formulations.

### 1.2 EFFECT OF FOOD INGESTION ON THE BCS CLASS H DRUGS

Food ingestion is known to induce various physiological changes in the GI tract weak bases constitute a significant portion of orally administered active pharmaceutical ingredients. Due to their ionization characteristics, they dissolve more readily at acidic pH. Depending on their lipophilicity and the administered dose, API

concentration in the fluids emptying from the stomach is likely to exceed the saturation solubility in the upper small intestine, especially in the fasted state (Psachoulis *et al.*, 2012).

Low or variable oral drug absorption and its strong dependence on formulation and physiological variables is often associated with precipitation of the drug upon transfer from acidic gastric pH to basic intestinal pH conditions, leading to low drug solution concentration in the intestine. Redissolution of the precipitated drug in the intestinal milieu is a function of the particle size and state of agglomeration of the precipitate, and the nature of the precipitate (amorphous Vs crystalline) (Narang *et al.*, 2015).

The pH-dependent solubility of weak acids and weak bases can contribute to the precipitation of drugs in the gastro intestinal tract. For example, small molecule drugs that are weak acids can precipitate in the acidic gastric environment upon oral dosing as a solution. Weak bases, when administered orally as solutions or solid particles, can dissolve rapidly in the acidic gastric environment but precipitate upon transfer of gastric contents to the basic milieu of the small intestine. This phenomenon can be a significant contributor to the low and variable oral bioavailability, especially for low solubility drugs. Understanding of super-saturation and drug absorption relationships of weakly basic drugs, and their underlying mechanism, is essential for robust development of their oral formulations (Narang *et al.*, 2015).

The length of the duodenum, the proximal part of the small intestine, is only approximately 22 cm in humans, but the residence time in the duodenum includes some major changes in the environment for a molecule or a particle. Bicarbonate is secreted in the duodenum like the secretion of hydrochloric acid in the stomach, leading to a sharp increase in pH. The bicarbonate secretion is hormonally regulated, and the median pH in the mid to distal duodenum has been reported to be 6.1. In the duodenal bulb, several studies have measured the pH to be highly variable with a range of 2.4-6.8, which indicates that a drug gets affected as it moves to duodenum and further leads to precipitation. (Carlert *et al.*, 2012).

Precipitation in the small intestinal environment is preceded by the formation of a supersaturated solution of the drug in the intestinal lumen as gastric contents transfer into the intestine. The amount and duration of a drug remaining in the supersaturated solution state relative to the small intestinal transit time in the region of maximum drug absorption would, therefore, impact the rate and extent of oral drug absorption. This duration of drug supersaturation in the intestinal lumen relative to the bio-relevant time window of drug absorption is expected to depend on several factors including gastric emptying, gastrointestinal motility, drug solubilization by bile acid micelles and drug dissolution as well as the reabsorption of water in the intestine (Carlert *et al.*, 2012; Narang *et al.*

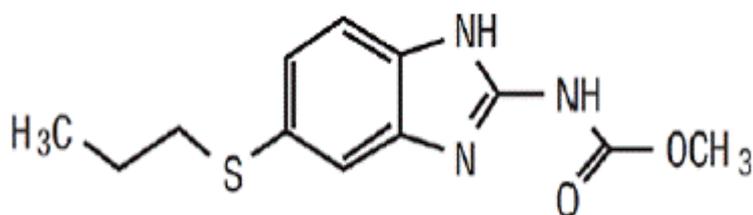
al.,2015). There is a need to validate such in vitro methods aiming to capture the effects of Class I High Solubility High permeability intestinal precipitation on the bioavailability by comparison to in vivo data. The lack of knowledge of the relation between precipitation and human bioavailability makes it difficult to qualitatively determine the correlation to in-vitro precipitation models.

### 1.3 SOLID SELF NANO EMULSIFYING DRUG DELIVERY SYSTEM (S. SNEDDS):

Solid SNEDDS combine the advantage of conventional liquid SNEDDS like enhance solubility and bioavailability with those of solid dosage forms like relatively lower production costs, convenience of process

## 3. RESULT AND DISCUSSION

### 3.1 POLYMER PROFILE



**Albendazole: (ABZ); Synonyms : Alnebza**  
**IUPAC Name: Methyl 5-propylthio-1H-benzimidazol 2-ylcarbamate**

**HPMC: (Hydroxypropyl methylcellulose)**

HPMCs are mixed ethers of cellulose, in which 16.5-30% of the hydroxyl groups are methylated and 4-32% are derivatized with hydroxypropyl groups: TYPE 2910 has an average methoxy content of 29% and an hydroxypropyl content of 10%. The molecular weight of the HPMC ranges from about 10,000 to 1500000.

**Trade Name:** Hypromellose.

control, better stability, reproducibility, better patient compliance, precise dosing and ease in handling and storage. (Agarwal et al. 2009).

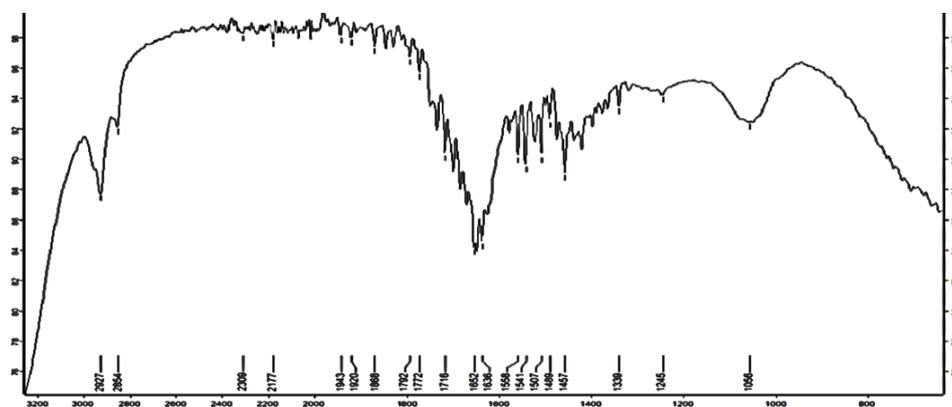
## 2. OBJECTIVE

To prolong the super saturation of BCS class II drug by preparing the self-emulsifying drug delivery system using anti precipitant that is HPMC.

The aim of the research article prepare the SS-SNEDDS to prolong the supersaturation by added precipitation inhibitor (HPMC). determined of the turbidity and particle size analysis by UV visual spectroscopy and particle size analyzer.

**Melting point:** Browns at 190-200°C; Chars at 225-230°C.

**Solubility:** Soluble in cold water, forming a viscous colloidal solution, practically insoluble in chloroform, ethanol (95%), and ether, but soluble in mixtures of ethanol and dichloromethane. mixtures of methanol and dichloromethane and mixtures of water and alcohol. Certain grades of HPMC are soluble in aqueous acetone solutions, mixtures of dichloromethane and propanol and other organic solvent.



FTIR assay.

## 4. CONCLUSION

Anthelmintic are drugs that either kill (vermicide) or expel (verdictive) infesting helminths In the human body git is the abode of many helminths but some also live-in tissue or their larvae migrate into tissue. They harm the

host by depriving him of food causing blood loss injury to organs intestinal or lymphatic obstruction and by secreting toxin A.

Albendazole one dose treatment has produced cure rates in ascariasis, hookworm both species and anaerobiosis.

In the strongyloidiasis its more effective than Mebendazole Mechanism of action after taking this medicine it inhibits glucose uptake by worm so without glucose worm becomes weak and finally death of worm occurs in any adverse effects.

On prolonged use neutropenia and jaundice special precaution with liver kidney bone marrow depression patients also with pregnant women dosage after 2 year of age 400 mg tablet given totally three times in 14 days interval 1 to 2 years of age 200 mg liquid three to four time in 14 days gap Hydatid disease 400 mg tablet twice daily for 28-day Pyrantel pamoate its less active against strongyloidiasis and inactive against trichuris.

## REFERENCES

1. Agarwal V, Siddiqui A, Ali H, Nazzal S. Dissolution and powder flow characterization of solid self-emulsified drug delivery system (SEDDS). *Int. J. Pharm.*, 2009; 12: 44-52.
2. Wu G, Robertson DH, Brooks CL, Vieth M. Detailed analysis of grid-based molecular docking: A case study of CDOCKER?A Charm-based MD docking algorithm. *J Comput Chem*, 2003; 24: 1549–1562.
3. Bevernage J, Brouwers J, Brewster ME, Augustijns P. Evaluation of gastrointestinal drug supersaturation and precipitation: strategies and issues. *Int J Pharm*, 2013; 453(1): 25–35.
4. Yu H, Xia D, Zhu Q, Zhu C, Chen D, Gan Y. Supersaturated polymeric micelles for oral cyclosporine A delivery. *Eur J Pharm Biopharm*, 2013; 85(3): 1325-36.
5. Takano R, Takata N, Saito R, Furumoto K, Higo S, Hayashi Y, Machida M, Aso Y, Yamashita S. Quantitative analysis of the effect of supersaturation on in vivo drug absorption. *Mol Pharm*, 2010; 7(5): 1431-40.
6. Psachoulas, D., Vertzoni, M., Butler, J. *et al.* An *In Vitro* Methodology for Forecasting Luminal Concentrations and Precipitation of Highly Permeable Lipophilic Weak Bases in the Fasted Upper Small Intestine. *Pharm Res*, 2012; 29: 3486–3498.
7. Narang, A.S., Badawy, S., Ye, Q. *et al.* Role of Self-Association and Supersaturation in Oral Absorption of a Poorly Soluble Weakly Basic Drug. *Pharm Res*, 2015; 32: 2579–2594.
8. Carlert S, Akesson P, Jerndal G, Lindfors L, Lennernas H, Abrahamsson B. In vivo dog intestinal precipitation of mebendazole: a basic BCS Class II drug. *Mol. Pharm*, 2012; 9: 2903–2911.