

Review Article

A Review On Analytical Methods For Determination of Losartan Potassium And Pioglitazone In Different Dosage Form

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ABSTRACT

Nowadays antihypertensive drugs like Losartan Potassium and Antidiabetic drugs like Pioglitazone represent the first choice in the treatment of patients with type 2 diabetic nephropathy. Losartan Potassium reduced the degree of proteinuria while Pioglitazone act as efficient insulin sensitizers. Generally the Combination of Losartan Potassium and Pioglitazone are used for patients suffering from the diabetes mellitus which leads to end stage renal disease. This article narrates different chromatographic (HPLC, HPTLC, LC) & different Spectrophotometric method (UV) for Statin class single drug as well as combination with other drug. Thus, this paper will help in the selection and development of proper analytical methodologies for estimation of Losartan Potassium and Pioglitazone to achieve satisfactory results.

Key-words: Losartan Potassium, Pioglitazone, UV Spectroscopy, Different Chromatography (HPLC, HPTLC, LC).

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Introduction [1-2]:

Pioglitazone proliferator-activator receptor agonist. Pioglitazone is an oral drug that reduces the amount of glucose (sugar) in the blood. It is in a class of anti-diabetic drugs called thiazolidinedione that are used in the treatment of type 2 diabetes. Patients with type 2 diabetes cannot make enough insulin, and the cells of their body respond less to the insulin that is produced. Since insulin is the hormone that stimulates cells to remove glucose from the blood, the reduced amount of insulin and its reduced effect cause cells to take up less glucose from the blood and the level of glucose in the blood to rise. Pioglitazone often is referred to as an “insulin sensitizer” because it attaches to the insulin receptors on cells throughout the body and cause the cells become more sensitive (more responsive) to insulin. As a result, more glucose is removed from the blood, and the level of glucose in the blood falls. At least some insulin must produce by the pancreas in order for pioglitazone to work. Pioglitazone also lower the level of glucose in the blood by reducing the production and secretion of glucose into blood by the liver. so Pioglitazone is widely used in the treatment of diabetes & diabetes mellitus. In addition, pioglitazone may alter the blood concentrations of lipids (fats) in the blood. Specifically, it decreases triglycerides and increases the “good” (HDL) cholesterol.

Losartan Potassium is non-peptide angiotensin II antagonist. Losartan Potassium is a member of class I antihypertensive agent. Losartan Potassium also indicated for the treatment of essential hypertension & left ventricular hypertrophy and end stage renal disease and reduce proteinuria. It is effectively used for the treatment of hypertension and heart disease either singly or sometime with the combination of diuretics. It is also recommended for the patient having type II diabetic disease with proteinuria and stroke prevention. This drug is white crystalline, Soluble in aqueous medium, selective, non-peptide and angiotensin II receptor antagonist.

It is observed in many cases the patients suffers from diabetes mellitus which leads to end stage renal disease. So, the combination of Losartan Potassium and Pioglitazone are used for patients suffering from the diabetes mellitus which leads to end stage renal disease.

This study was performed to ascertain whether losartan combined with pioglitazone is superior to losartan alone in delaying the progression of chronic renal failure in patients with type 2 diabetic nephropathy.

This Review Article offers an overview of various analytical methods for estimation of Losartan potassium and Pioglitazone. Different methods have been developed for estimation of Statins like UV-Spectroscopy, Liquid Chromatography, HPTLC and RP-HPLC

Reported methods are categorized depending on the following considerations.

1. Single component analyzed by UV-spectroscopy methods and chromatographic method.
2. Analysis of Losartan Potassium and Pioglitazone combination with other class drugs by UV-Spectroscopy methods and Chromatographic method.

Table: 1. Analysis of single component Losartan Potassium and Pioglitazone by UV-spectroscopy methods. [3-7]

SR.NO	DRUG	METHOD	DESCRIPTION	REF NO.
1	Losartan Potassium Tablet	UV- Spectrophoto Meter	Solvent: Water Detection: 234 nm. Correlation coefficient (r²) =0.9996	3
2.	Losartan Potassium in Tablet	UV derivative spectrophotometric	Solvent: Methanol Detection: 234 nm. Correlation coefficient: 0.9996 Conc. Range: 4.00-14µg/ml	4
3.	Pioglitazone	UV- Spectrophoto Meter	Solvent: Methanol Detection: 234 nm Correlation coefficient: 0.996 Conc. Range: 2.00-12 µg/ml.	5

4.	Pioglitazone in Pharmaceutical dosage form	UV- Spectrophoto Meter	Solvent: Ethanol Detection: 224.4 Conc. Range: 5-25 µg/mL	6
5.	Pioglitazone hydrochloride in bulk and tablet dosage form.	UV- Spectrophoto Meter	Solvent: Methanol: Water: HCl (250:250:1) Concentration range: 10-70 µg/ml. Molar absorptivity: 9.6013 ×10 ⁴ L/mol.cm. λ_{max}: 269 nm	7

Table: 2. Analysis of Losartan Potassium and Pioglitazone in combined dosage form by UV-Spectroscopy [8-14]:

SR NO.	DRUG	METHOD	DESCRIPTION	REF.NO
6.	Losartan potassium, Hydrochlorothiazide & Amlodipine besilate in Tablet Dosage Form.	UV- Spectrophoto Meter	<p>1st UV: Detection: Amlodipine besilate:236.5 Losartan Potassium:254 Hydrochlorothiazide:271</p> <p>Conc. Range: Amlodipine besilate:5-25µl Losartan Potassium:10-50µl Hydrochlorothiazide:5-25µl</p> <p>2st UV: Detection: Amlodipine besilate:231.5-241.5 Losartan Potassium:266-276 Hydrochlorothiazide:249-259</p> <p>Conc. Range: Amlodipine besilate:5-25µl Losartan Potassium:10-50µl Hydrochlorothiazide:5-25µl</p> <p>Solvent: 0.025 M phosphate buffer(pH 3.7):Acetonitrile (57:43 v/v)</p>	8
7.	Losartan Potassium and Atenolol in combined dosage form	UV- Spectrophoto Meter (Q-Absorption ratio method)	<p>Solvent: Methanol Detection: Losartan Potassium:280nm Atenolol:275 nm Correction coefficient:0.999 Conc. Range:5-50µg/ml LOD: 0.72µg/ml at 275nm & 0.74 µg/ml at 280nm LOQ:2.45µg/ml at 275nm & 1.78µg/ml at 280 nm</p>	9

8.	Pioglitazone and Glimepiride in Tablet Dosage Form	UV Derivative Spectrophoto Metric methods	Solvent: methanol λmax: GLIM: 225.6 nm PIO: 267.2 nm	11
9.	Atenolol in combination with losartan potassium and hydrochlorothiazide in bulk and tablet formulation	Spectrophotometric method for simultaneous estimation.	Solvent: Dissolve in methanol and dilute with water. Detection: LosartanPotassium:251.60 nm Atenolol: 224.20nm Hydrochlorothiazide:271nm Correlation coefficient: Losartan Potassium:0.9991 Atenolol:0.9993 Hydrochlorothiazide:0.9995	10
10.	Pioglitazone HCl with Glimepiride, Metformin HCl In Bulk And Marketed Formulation.	UV Derivative Spectrophoto Metric methods	Solvent: 0.1 N NaOH solution and distilled water (50:50) Detection Range: 237 nm Pioglitazone::265.5 nm Glimepiride:227 nm Metformin: 233 nm	12
11.	Pioglitazone HCl with Glimepiride, Metformin HCl In Bulk And Marketed Formulation.	UV Derivative Spectrophoto Metric method	Solvent: Methanol: Water(50:50) Detection Range: Metformin HCl: 236.5 nm Glimepiride: 226.4 nm Pioglitazone HCl : 227.3 nm	13
12.	Pioglitazone HCl & Atorvastatin calcium In Its Multicomponent Dosage Forms.	UV Simultaneous Spectroscopy	Solvent: Ethanol Concentration Range: ATV: 1-5µg/ml. PIO: 3-15µg/ml. λmax: ATV: 210nm PIO: 225 nm	14

Table: 3. Analysis of single component Losartan Potassium and Pioglitazone by chromatographic method.

SR.NO	DRUG	METHOD	DESCRIPTION	REF NO.
13.	Losartan Potassium (USP)	LC (Dissolution Test 2)	Column: 4.6 mm× 15 cm, 5µm Packing L10 Column Temp. :45° Flow rate: 1.5 ml/min Injection size : 10 µl Detection: 265 nm Mobile Phase: Methanol: acetonitrile: Buffer (20:20:60) Tailing Factor: NMT 2.0 RSD : NMT 2.0%	15

14.	Losartan Potassium	LC (Uniformity of dosage units)	<p>Column: 4.6 mm× 5 cm, 10µm packing L7 Column efficiency: NLT 3000 Theoretical plates.</p> <p>Detection: 230 nm</p> <p>Flow rate: 1.4 ml /min</p> <p>Injection size: 20µl</p> <p>Mobile Phase: Acetonitrile: Buffer (Dissolve 1.36 mg/ml of monophasic potassium phosphate in water. Adjust with phosphoric acid to a pH OF 2.5) (3:2)</p> <p>RSD: NMT 2%</p>	15
15.	Losartan Potassium Tablets.	LC	<p>Column: 3.9 mm× 15 cm; 5µm packing L7</p> <p>Flow rate: 1.0 ml/min</p> <p>Injection size:10 µl</p> <p>Detection: 250 nm</p> <p>Mobile Phase: Acetonitrile: Buffer (3:17).</p>	15
16.	Losartan Tablet (IP)	LC (Dissolution)	<p>Column: stainless steel (25cm ×4mm) packed with octadecylsilane bonded to porous silica (5 mm). (such as Lichrosphere RP8e)</p> <p>Mobile Phase: Buffer (770 mg of ammonium acetate in 1000 ml water + 2 ml triethylamine, Adjust pH 6.5 with glacial acetic acid): acetonitrile (75:25).</p> <p>Flow rate:1.5 ml/min</p> <p>Detection: 235 nm</p> <p>Injection volume: 10µl</p>	15
17.	Losartan Potassium Tablet.	LC	<p>Column: stainless steel (25 cm × 4 mm) packed with octylsilane bonded to porous silica (5mm).</p> <p>Mobile Phase: 0.005 M</p>	15

			ammonium acetate : acetonitrile: methanol: triethylamine,adjust the pH to 6.6 with glacial acetic acid.(65:30:5:0.2) Flow rate: 1ml/min Detection: 237nm.	
18.	Losartan Potassium	LC	Column: stainless steel (25 cm × 4 mm) packed with octylsilane bonded to porous silica (5mm). Mobile Phase : (A) 0.1% w/v solution of ortho-phosphoric acid in water & filter, (B) acetonitrile. Gradient programme. Flow rate: 1ml/min Detection: 254nm	15
19.	Losartan Potassium in Pharmaceutical Formulation.	HPLC	Column: Shimadzu CLC-C8 Mobile Phase: Triethylamine solution(0.5%) pH 2.4 & acetonitrile 60:40(v/v) Detection: 225nm Conc. Range: 15-45µg/ml.	16
20.	Pioglitazone HCl	LC	Column: Stainless steel (25 cm ×4.6cm) packed with octadecylsilane bonded to porous silica. Mobile phase: 0.01 M potassium dihydrogen phosphate : acetonitrile (50:50) Flow rate: 1ml/min Detection: 225 nm	17
21.	Pioglitazone Tablet	LC (Pioglitazone HCl in solvent mixture)	Column: Stainless steel (25 cm× 4.6 cm) packed with octadecylsilane bonded to porous silica. Mobile phase: potassium dihydrogen orthophosphate (1.36 gm.) & di ammonium hydrogen phosphate (1.15 gm.)	17

			In 1000 ml water. Flow rate: 1.5 ml/min Detection: 270 nm	
22.	Pioglitazone HCL in bulk and Pharmaceutical formulation	HPLC	Column: 5 μ m symmetry C18 column (250 \times 4.6 mm i.d) Mobile Phase: 0.01 M potassium dihydrogen phosphate buffer (pH 6.0):ACN (50:50, v/v) Detection: 225 nm Flow rate: 1.0 ml/min	18
23.	Pioglitazone	RP-HPLC	Column: reversed-phase Intersil ODS C18 (150 mm \times 4.6 mm, 5 μ m) Mobile phase: Ammonium acetate buffer with Acetonitrile and Glacial acetic acid in the ratio 50:50:1 (v/v) Detection :269 nm Flow rate: 0.7 ml/min	19
24.	Pioglitazone in Human Plasma	RP-HPLC	Column: Nova-Pak C8 Mobile phase: acetonitrile-140mM K ₂ HPO ₄ (40:60, v/v, pH = 4.45) Detection: 269 nm Flow rate: 1.4ml/min	20

Table: 4. Analysis of Losartan Potassium and Pioglitazone in combined dosage form by chromatographic methods.

SR.N O	DRUG	METHOD	DESCRIPTION	REF. NO.
25.	Losartan Potassium & Hydrochlorothiazide in Binary mixtures.	RP-HPLC	Column: Phenomenex C18 column (250 \times 4.6mm, 5 μ). Mobile Phase: methanol and Phosphate buffer pH 6.7 (80:20v/v). Flow rate: 1ml/min. Detection: 225 nm.	21

26.	Losartan Potassium & Hydrochlorothiazide Tablets.	HPLC	<p>Column: stainless steel (30cm× 3.9 mm) packed with octadecylsilane bonded to porous silica (10µm).</p> <p>Mobile Phase: Buffer(0.78gm of sodium dihydrogen orthophosphate in 500 ml water, adjusted to pH 2.5 with orthophosphoric acid) :Acetonitrile.(60:40)</p> <p>Flow rate: 1ml/min</p> <p>Detection: 220nm.</p> <p>Injection volume: 20µl.</p>	22
27.	Losartan Potassium & Hydrochlorothiazide in Tablet Dosage Form	RP-HPLC	<p>Column: Shim-pack CLC-ODS (250mm×4.6mm,5µ)</p> <p>Mobile Phase:0.025 M phosphoric acid solution: acetonitrile(60:40 v/v ,pH adjusted with 80% phosphoric acid)</p> <p>Flow rate:1.5 ml/min</p> <p>Detection:254nm</p> <p>Retention time: Losartan Potassium::8.790 min Hydrochlorothiazide: 3.748 min</p>	23
28.	Losartan Potassium & Amlodipine Besylate Tablets.	HPLC	<p>Column: Inertsil ODS-4 HP (3 µm, 50 x 4.6 mm I.D.)</p> <p>Mobile phase: A) CH₃OH B) CH₃CN C) 0.7 % Triethylamine (pH 3.0, H₃PO₄) A/B/C =7/3/10, v/v/v.</p> <p>Flow rate: 1.0 mL/min Column.</p> <p>Temp. : 25 °C 1</p> <p>Detection: UV 237 nm</p> <p>Injection Vol.: 5 µL</p>	24
29.	Losartan potassium,Hydrochlorothiazide & Amlodipine besilate in Tablet Dosage Form.	HPLC	<p>HPLC:</p> <p>Column:Kromasil C18 (4.6mm i.d×250mm)</p> <p>Detection :232nm</p> <p>Conc. Range: Amlodipine besilate:2-14µl</p>	25

			<p>Losartan Potassium:20-140µl Hydrochlorothiazide:5-40µl</p> <p>Mobile Phase: 0.025 M phosphate buffer(pH 3.7):Acetonitrile (57:43 v/v)</p>	
30	Losartan Potassium & Ramipril in Combined Dosage Form.	RPHPLC	<p>Column: Hypersil ODS C18, 4.6×250mm, 5µm in Isocratic mode.</p> <p>MobilePhase:acetonitrile:methanol:10mM tetra butyl ammonium hydrogen sulphate in water.(30:30:40)</p> <p>Flow rate:1.0ml/min</p> <p>Detection:210nm</p> <p>Retention times: Losartan Potassium:4.7 Ramipril:3.3</p> <p>Linearity range: Losartan Potassium:0.004-100µg/ml Ramipril:0.2-300µg/ml.</p>	26
31.	Losartan, Hydrochlorothiazide & Amlodipine in Bulk & Formulation.	RPHPLC	<p>Column: Hypersil Gold(250mm× 4.6mm, 5µ)</p> <p>Mobile Phase:methanol:water (95:5%v/v)</p> <p>Flow rate:0.8ml/min</p> <p>Detection:230nm</p>	27
32.	Losartan Potassium, Hydrochlorothiazide & Atenolol in Tablet Formulation.	RPHPLC	<p>Column:Phenomenex C18</p> <p>Mobile Phase: acetonitrile: 50mM potassium dihydrogen ortho phosphate (pH 3.5)(50:50)</p> <p>Flow rate: 1mL/min</p> <p>Detection:270nm</p>	28
33.	Amlodipine Besylate, Losartan Potassium, Valsartan & Atorvastatin in Pharmaceutical Formulation.	HPLC	<p>Column: Spherical monomeric C18 (250×4.6 mm, 5µ)</p> <p>Mobile Phase: Ammonium acetate (Ph5.5,0.01M) :acetonitrile(45:55 v/v)</p> <p>Flow rate:1.5 ml/min at 40°C</p>	29

			Detection: 240nm.	
34.	Losartan & perindopril in pure Form & Tablet Formulation.	RPHPLC	Column: LUNA C18 Isocratic mode Mobile phase: Methanol and phosphate buffer (pH 6.8) (85:15) Flow rate: 0.8 ml/min Detection: 210nm	30
35.	Losartan & Ramipril in Pharmaceutical Dosage Form.	HPTLC	Mobile phase: methanol: ethyl acetate: toluene: glacial acetic acid (1:9:1:0.2 v/v/v/v). Detection: 210 nm.	31
36.	Losartan Potassium & Enalapril maleate in Pharmaceutical Dosage Form	RPHPLC	Column: C-18 BDS Hypersil column (250mm × 4.6 mm id 5µm) Mobile phase: Buffer-Acetonitrile(60:40 v/v) pH4.5 adjusted With o-Phosphoric Acid Flow rate: 1.0 ml/min Detection : 235nm	32
37.	Pioglitazone HCl With Metformin HCl in Combined Tablet Dosage Form.	RPHPLC	Mobile phase: acetonitrile:water:acetic acid (60:40:0.3) Detection: 230 nm Flow rate: 1 ml/min	33
38.	Pioglitazone with Metformin & Glimepiride in Pharmaceutical Dosage Forms.	HPLC	Column: Phenomenex-ODS-3 (C-18) column (250 × 4.60 mm, 5 µm) Mobile phase: methanol: acetonitrile:15 mM potassium dihydrogen phosphate (pH 4) (40:35:25 (v/v)) Flow rate : 1 ml/min Detection: 240 nm	34
39.	Pioglitazone with Glimepiride and metformin in Pharmaceutical Dosage Forms	RPHPLC	Column: Inertsil ODS -3V (250 mm × 4.6 mm, 5µm) column. Mobile phase: acetonitrile, tetra hydro furan, and buffer at	35

			pH 5 Flow rate: 1.7 ml/min Detection: 228 nm	
40.	Pioglitazone and Glimpiride in Tablet Dosage Form	RPHPLC	RP-HPLC-Column: C ₁₈ (250 × 4.6,5µm) Mobile Phase: Methanol: Water (72:28) Flow rate: 1.0 ml/min	11
41.	Pioglitazone and Alogliptin in bulk and dosage form	HPLC	Column: Hypersil C18, 250mm × 4.6mm, 5µ (particle size) Mobile Phase: Buffer pH 3.5: Methanol (70:30) Detection: 271 nm Column Temp.: 25° C Flow rate: 1.0 ml/min Conc. Range: Pioglitazone: 3.75-18.75µg/ml Alogliptin: 6.25-31.25 µg/ml Correlation Coefficient: Pioglitazone:0.9997 Alogliptin:0.9993	36

Conclusion:

This review represents the reported spectrophotometric and chromatographic methods developed and validated for determination Losartan Potassium and Pioglitazone. According to the literature review it can be concluded that for Losartan Potassium and Pioglitazone in single component and its combination with other drug spectroscopy and chromatography methods available. This all methods are found to be simple, accurate, economic, precise, and reproducible in nature. Comparing various validation parameters of already reported methods, it can be concluded that different analytical methods like spectrophotometric, HPTLC and HPLC can be developed for Losartan Potassium and Pioglitazone showing its simplicity, sensitivity (low LOD and LOQ values) linearity and accuracy. As per Review most of work have used the reversed-phase HPLC and UV absorbance detection because this provided with best available reliability, repeatability, analysis time and sensitivity. There is a great scope for development of newer analytical methods for drugs such as Losartan Potassium and Pioglitazone combination.

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