

## A Reviw Article on UV and HPLC Method for Dapagliflozin and Linagliptin in Synthetic Mixture.

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Submitted: 05-05-2023

ABSTRACT

The type 2 Diabetes mellitus affects 90% of people with diabetes and causes high blood sugar level and other medical condition that are associated with it, including an increase risk of cardio vascular diseases, neurological and nephrological disease problem. The analytical method have been show in the literature, including UV spectroscopy, High performance liquid chromatography(HPLC). The combined use of dapagliflozin and linagliptin for managing T2DM is reasonable and attractive because of their different but complementary mechanism of action and separate path of degradation. The combination use of SGLT-2 inhibitor and DPP-4 inhibitor is significantly associated with a decrease in glycemic control, body weight and systolic blood pressure.

Keywords: Dapagliflozin, Linagliptin, HPLC, UV.

## I. INTRODUCTION OF DISEASE.<sup>[1-4]</sup>

- Insulin is a hormone produced by the pancreas that regulates the amount of glucose in the blood. In diabetes mellitus, either the pancreas does not produce enough insulin or the body cannot effectively use the insulin that is produced.
- Type 1 diabetes is an autoimmune condition in which the immune system attacks and destroys the cells in the pancreas that produce insulin. Type 2 diabetes is a metabolic disorder that occurs when the body becomes resistant to insulin or when the pancreas cannot produce enough insulin to meet the body's needs.
- In people with type 2 diabetes, medications such as metformin, sulfonylureas, DPP-4 inhibitors, GLP-I receptor agonists, and SGLT2 inhibitors may be used to lower blood sugar levels.
- Regular monitoring of blood sugar levels is important for people with diabetes mellitus. In

addition to HbA1c, other tests such as fasting plasma glucose (FPG) and oral glucose tolerance test (OGTT) may be used to diagnose diabetes or to monitor blood sugar control.

Accepted: 15-05-2023

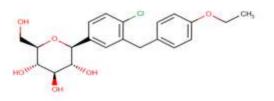


Fig:1 Chemical structure of Dapagliflozin

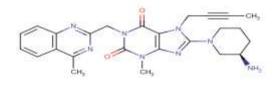


Fig: Chemical structure of Linagliptin.

Introduction of dapagliflozin.<sup>[5,6]</sup>

- On January 8, 2014 USFDA approved dapagliflozin to treat type 2 diabetes which was followed by approval to reduce the risk of hospitalization for HF in adult patients with type 2 diabetes and established CV disease or multiple CV risk factors in October 2019.
- Dapagliflozin (Forxiga) is one such SGLT2 inhibitor that is approved for the treatment of T2D in various countries worldwide, including the EU and USA.



Mechanism of action of Dapagliflozin.<sup>[8]</sup>

Dapagliflozin inhibits the sodium-glucose contransporter 2(SGLT2) which is primarily located in the proximal tubule of the nephron. SGLT2 facilitates 90% of glucose resorption in the kidneys and so its inhibition allows for glucose to be excreted in the urine. This excretion allows for better glycemic control and potentially weight loss in patients with type 2 diabetes mellitus.

Introduction of Linagliptin.<sup>[7]</sup>

- Linagliptin is an oral antihyperglycemic agent that selectively inhibits the enzyme dipeptidyl peptidase-4 (DPP-4).
- May 2,2011 USFDA approved Linagliptin for improving blood glucose control in adult with type 2 Diabetes.

Linagliptin is a xanthine-based orally administered, potent, and long-acting nonpeptidomimetic DPP-4 inhibitor that has been developed for treating T2DM.

Mechanism of action of Linagliptin.<sup>[9]</sup>

Linagliptin is a competitive, reversible DPP-4 inhibitor. Inhibition of this enzyme slows the breakdown of GLP-1 and glucose-dependant insulinotropic polypeptide (GIP). GLP-1 and GIP stimulate the release of insulin from beta cells in the pancreas while inhibiting release of glucagon from pancreatic beta cells. These effects together reduce the breakdown of glycogen in the liver and increase insulin release in response to glucose.

Sr.no.	Method	Description	
			no.
1	Estimation of Dapagliflozin from	Solvent: Methanol: Water.	10
	its Tablet Formulation by UV-	Linearity: 5-40µg/ml.	
	Spectrophotometry.	METHOD-1	
		wavelength:224nm.	
		METHOD-2	
		wavelength:218-230nm.	
		METHOD-3	
		wavelength:220nm.	
		METHOD-4	
		Detection wavelength: 224nm, 235.5nm.	
2	Unique UV Spectrophotometric	Solvent: Ethanol: Phosphate Buffer (ph-	11
	method for Reckoning of	7.2) (1:1%v/v).	
	Dapagliflozin in Bulk and	<b>Linearity:</b> 10-35 µg/ml	
	Pharmaceutical Dosage form.	Detection wavelength:233.65nm.	
3	Development and validation of UV	Solvent: Methanol	12
	Spectroscopic method for	Linearity:0.5-2.5µg/ml	
	Dapagliflozin in its API and its	Detection wavelength:226nm	
	Tablet Formulation.		
4	Development and Validation of	Solvent: Methanol	13
	UV Spectroscopic First Derivative	Linearity	
	method for simultaneous	<b>Dapagliflozin</b> : 0.5-2.5 µg/ml	
	estimation of Dapagliflozin and	Metformin hydrochloride :25-125 µg/ml	
	Metformin Hydrochloride in	Detection wavelength:	
	Synthetic Mixture.	Dapagliflozin:235nm.	
	-	Metformin hydrochloride:272nm	

Table: 1 Method for Determination of Dapagliflozin and Linagliptin single and combination with other drugs by UV Spectroscopy, chromatography and other



5	Development and Validation of UV Spectroscopic Method for Simultaneous Estimation of Dapagliflozin and Metformin Hydrochloride in Synthetic Mixture.	Solvent: Methanol Linearity: Dapagliflozin:0.5-2.5 μg/ml Metformin Hcl:25-125 μg/ml Detection wavelength: Dapagliflozin: 225nm Metformin Hcl: 237nm	14
6	Development and Validation of UV Spectroscopic Method for Simultaneous Estimation of Dapagliflozin and Saxagliptin in Marketed Formulation.	Solvent:pH6.8 ofPhosphate Buffer Linearity: Dapagliflozin:5-25 μg/ml Saxa: 5-25 μg/ml Detection wavelength: Dapagliflozin:276nm Saxa:222nm	15
7	A Novel Method Development and Validation of Dapagliflozin and Metformin Hydrochloride 222 nm using Simultaneous Equation Method by UV– Visible Spectroscopy in Bulk and Combined Pharmaceutical Formulation including Forced Degradation Studies.	Solvent- Water Detection Wavelength: Dapagliflozin: 222 nm Metformin: 232 nm Linearity- Dapagliflozin: 2 - 32 µg/ml Metformin: 1 - 20µg/ml	16
8	RP-HPLC Method for Estimation of Dapagliflozin form its Tablet.	Stationary phase: Princeton C18 column.Mobilephase:Acetonitrile:0.1%Triethylamine(pH-5.0)(50:50%v/v).Flow rate:1ml/min.Injected vol: 20µl.Detection wavelength: 224nm	17
9	Development and validation of High-Performanceliquid Chromatographic Method for Determination of Dapagliflozin and its Impurities in Tablet Dosage Form.	Stationary phase:HypersilBDSC18column (250mm×4.6mm,5µm).Mobile phase:Mobile phase-A (Buffer pH-6.5)andMobile phase-B (Acetonitrile:Water 90:10% v/v).Flow rate:1 ml/min.Detection wavelength:245nm.	18
10	Development and validation of stability-indicating RP-HPLC method for Determination of Dapagliflozin.	Stationary phase: BDSC18 column.Mobilephase:Acetonitrile:Orthophosphoric acid.Flow rate:1ml/min.Injection vol:10 μlDetection wavelength: 245nm.	19
11	Development and stability indicating HPLC for Dapagliflozin in API and Pharmaceutical Dosage Form.	<b>Stationary phase:</b> Agilent C18 column (4.6mm*150,5μm). <b>Mobile phase:</b> Acetonitrile: Dipotassium hydrogen phosphate (pH6.5with adjust OPA) (40:60% v/v). <b>Flow rate:</b> 1ml/min.	20

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		Injection vol: 101	
		<b>Injection vol</b> :10 µl <b>Detection wavelength:</b> 222nm.	
12	Stability Indicating HPLC Method	Stationary phase: Xterra C18 Column.	21
12	for the Simultaneous	(4.6*150mm,5µm)	21
	Determination of Dapagliflozin	<b>Mobile phase</b> : Acetonitrile: Water (60:40	
	and Saxagliptin in Bulk and Tablet	%v/v).	
	Dosage Form.	Flow rate: 1 ml/min.	
		Injected vol.: 20µl.	
13	Development and Validation of	Stationary phase:PhenomenexlunaC18	22
	RP-HPLC Method for	Column(4.6mm $\times$ 250mm,5 $\mu$ m).	
	Simultaneous Estimation of	Mobile phase: Acetonitrile:	
	Dapagliflozin and Metformin in	Water( $75:25\%v/v$ ).	
	Bulk and in Synthetic Mixture.	Flow rate: 1ml/min.	
		<b>Injected vol</b> :10 μl	
		Detection wavelength: 285nm.	
14	A highly validated RP-HPLC	Stationary phase:BDS C8 Column	23
	method for the Simultaneous	(50*4.6mm,5µm).	
	Estimation of Dapagliflozin and	<b>Mobile phase</b> : KH <sub>2</sub> PO <sub>4</sub> : Acetonitrile	
	Saxagliptin in Tablet Dosage	(55:45% v/v).	
	Form.	Flow rate:1ml/min.	
		Injection vol:10µl	
		Detection wavelength:210nm.	
15	Development and validated	Stationary phase:C18 column	24
	stability indicating assay method	(4.6×150mm,5μm).	
	for simultaneous estimation of	Mobile phase: Acetonitrile:0.1M	
	Metformin and Dapagliflozin by	Orthophosphoric acid. (70:30%v/v).	
	RP-HPLC.	Flow rate:1.0ml/min.	
		Detection wavelength:260nm	
16	Stability indicating HPLC Method	Stationary phase: Xterra C18 column	25
	for the Simultaneous	(4.6×150mm,5 μm).	
	Determination of Dapagliflozin	Mobile phase: Acetonitrile: Water	
	and Sexagliptin in Bulk and Tablet	(60:40% v/v).	
	Dosage Form.	Flow rate:1ml/min.	
		Injection vol: 20µl	
17	A New Uish Derfermen er Thin	Detection wavelength:248nm.	26
17	A New High-Performance Thin	HPTLC: Stationomy phones March TLC plates siling	26
	Layer chromatographic method	<b>Stationary phase:</b> Merck TLC plates silica	
	Development and Validation of Dapagliflozin in Bulk and tablet	gel aluminum plate (10×10CM). <b>Mobile phase:</b> Chloroform:	
	dosage form.	Methanol(9:1%v/v).	
	dosage form.	$R_F VALUE: 0.21\pm0.004$	
		Detection wavelength:223nm.	
18	A Stability Indicating RP-HPLC	Mobile Phase: Phosphate Buffer pH 3.5 and	27
10	Method Validation for	Acetonitrile $(80:20 \text{ v/v\%}) + 1 \text{ ml}$	21
	Simultaneous Estimation of	Triethylamine per 100 ml Mobile phase	
	Metformin HCl, Dapagliflozin and	Stationary phase:C18 column	
	Saxagliptin in Pharmaceutical	(250mm×4.6 mm), 5mm particle size	
	Dosage Form.	<b>Detection Wavelength:</b> 265 nm	
		Flow Rate: 1.0 ml/min	
19	Analytical Method Development	Solvent: Distilled Water.	28
-	and Validation for Determination	Linearity: 1-10µg/ml.	-
	of Linagliptin in Bulk and Dosage	Detection wavelength:295nm.	
	of Linagiptin in Durk and Dosage		



20	Development and Validation of	Solvent: Methanol	29
	UV spectrophotometric method for	<b>Linearity:</b> 5-80µg/ml.	
	Simultaneous Estimation of	Detection wavelength:	
	Empagliflozin and Linagliptin in	Empagliflozin:276nm,	
	bulk drugs and pharmaceutical dosage form.	Linagliptin: 293nm.	
21	RP-HPLC Method Development	Stationary phase: Phenomenex	30
	and Validation of Linagliptin in	C18column (4.6×100mm,5 μm).	
	Bulk Drug and Pharmaceutical	Mobile phase: Phosphate buffer: Methanol	
	Dosage Form.	(50:50% v/v).	
		Flow rate:0.8ml/min.	
		Injection vol:20µl	
22	Stability Indicating UDLC DAD	<b>Detection wavelength:</b> 238nm. <b>Stationary phase</b> : Zorbax eclipse XDB-	21
22	Stability Indicating HPLC-DAD Method for the Determination of	C18( $4.6 \times 150$ MM, $5\mu$ m) column.	31
	Linagliptin in Tablet Dosage	<b>Mobile phase</b> : Methanol: Water	
	Form: Application to Degradation	(40:60%  v/v).	
	kinetics.	Flow rate:1ml/min.	
		Detection wavelength: 225nm.	
23	Development and Validation of	<b>Stationary phase</b> : hypersil-BDS C18	32
	RP-HPLC Method for	column (250mm×4.6mm),5μm.	
	Simultaneous Estimation of	Mobile phase:KH <sub>2</sub> PO <sub>4</sub> and Acetonitrile	
	Metformin and Linagliptin in	(40:60%v/v).	
	Combined Pharmaceutical Dosage	Flow rate:1.0ml/min.	
	Form.	Detection wavelength: 250nm	
24	Analytical method Development	Stationary phase: THERMO	33
	and validation of Antidiabetic drug	C18,250cm×4.6mm,5µm column.	
	(Metformin and Linagliptin) in	<b>Mobile phase</b> : $KH_2PO_4$ and Methanol	
	tablet dosage form by using RP- HPLC method.	(65:35% v/v). Flow rate:1.0ml/min.	
	HFLC method.	Detection wavelength: 226nm.	
25	Development and Validation of a	Stationary phase:C18 column (BDS	34
20	Stability-Indicating HPLC Method	$250 \text{mm} \times 4.6 \text{mm}, 5 \ \mu\text{m}$ ).	51
	for Empagliflozin and Linagliptin	Mobile phase: 0.1% Orthophosphoric acid	
	in Tablet Dosage Form.	and Acetonitrile( $60:40\% v/v$ ).	
	C C	Flow rate: 1ml/min.	
		Detection wavelength:230nm	
26	Development and Validation of	<i>v</i> 1	35
	RP-HPLC Method for the	(250mm×4.6,5 μm).	
	Simultaneous Estimation of	<b>Mobile phase</b> : Acetonitrile: Methanol	
	Empagliflozin and Linagliptin in	(50:50%  v/v).	
	Solid Dosage Form.	Flow rate:1ml/min. Detection wavelength: 280nm.	
		Detection wavelengui: 200mm.	
27	RP-HPLC Method for	Stationary phase: X-bridge C18 column	36
	Simultaneous Estimation of	$(150\times4.6$ mm,5 µm).	
	Metformin and Linagliptin in	<b>Mobile phase</b> : Acetonitrile: 0.02M	
	Tablet Dosage Form.	Phosphate Buffer (ph 5.0) $(35:65\% v/v)$ .	
	-	Flow rate: 1.0ml/min.	
		<b>Injection vol:</b> 10 μl	
		Detection wavelength: 225 nm.	
28	Simultaneous quantification of	Stationary Phase: Phenomenex C18	37
	Empagliflozin, Linagliptin and	Column (250mm×4.6mm,5 μm).	
	Metformin Hydrochloride in Bulk	Mobile Phase: Acetonitrile: Methanol:	1

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	and Synthetic Mixture by RP-	Water (27:20:53% v/v/v) pH 4 adj. with	
	HPLC Method.	1%OPA.	
		Flow rate: 1ml/min.	
		Injection vol: 20µl	
		Detection wavelength: 223nm	
29	New Validated Stability Indicating	Stationary Phase: Agilent Eclipse XDB-	38
	RP-HPLC Method for The	C18(250mm× 4.6mm, 5 μm).	
	Simultaneous Determination of	Mobile Phase: 0.1% Triethylamine(pH-3)	
	Metformin Hydrochloride,	Buffer: Acetonitrile (40:60% v/v)	
	Linagliptin and Empagliflozin in	Flow rate: 1 ml/min	
	Bulk and Pharmaceutical Dosage	<b>Injection vol:</b> 10 μl	
	Form.	Detection wavelength: 240nm	

Sr.no	Ingredient	Quantity (mg)	Role
1	Linagliptin	5	API
2	Dapagliflozin	10	API
3	Microcrystalline cellulose	20	Disintegrate
4	Hydroxypropylmethylce llulose	15	Binder
5	Lactose monohydrate	20	Diluent
6	Magnesium stearate	10	Lubricant
7	Talc	20	Glidant
8	Total amount	100	-

## II. CONCLUSION

the  $\triangleright$ This review describes reported Spectroscopic and Chromatographic methods developed Dapagliflozin and Linagliptin. As per this review, it was concluded that for Dapagliflozin and Linagliptin, different Spectroscopic and chromatographic methods are available for single-single drugs. It was observed that still, any combination method of Dapagliflozin and Linagliptin is not available. Thus, all methods were simple, accurate. economical. precise, and reproducible. Nearly all Methods were of RP-HPLC and UV absorbance detection because these methods provided with best available reliability, repeatability, analysis time, and sensitivity.

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