

To study FTIR spectra of ketoconazole and CMC

Priyanka G. Sonwane, Prof. S.S.Shete & Dr. Santosh Jain

Aditya Institute of Pharmaceutical, Nalwandi road Beed, Maharashtra 431122 Department of Information Technology, Dr. Babasaheb Ambedkar Technological University, Lonere, Tal-Mangaon, Dist. Raigad. Maharashtra (India). 402103

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I. INTRODUCTION

A Fourier Transform InfraRed (FT-IR) Spectrometer is an instrument which acquires broadband Near InfraRed (NIR) to Far InfraRed (FIR) spectra. Unlike a dispersive instrument, i.e. a grating monochromator or spectrograph, FTIR spectrometers collect all wavelengths simultaneously. This feature is called the Multiplex or Fellgett Advantage.

FT-IR Spectrometers are often simply referred to as FTIRs. But for the purists, an FT-IR is a method of obtaining infrared spectra by first collecting an interferogram of a sample signal using an interferometer, and then performing a Fourier Transform (FT) on the interferogram to obtain the spectrum. An FT-IR spectrometer collects and digitizes the interferogram, performs the FT function, and displays the spectrum.

The Michelson Interferometer
An FTIR is typically based on The Michelson Interferometer Experimental Setup; an example is shown in Figure 1. The interferometer consists of a beam splitter, a fixed mirror, and a mirror that translates back and forth, very precisely. The beam splitter is made of a special material that transmits half of the radiation striking it and reflects the other half. Radiation from the source strikes the beam splitter and separates into two beams. One beam is transmitted through the beam splitter to the fixed mirror and the second is reflected off the beam splitter to the moving mirror. The fixed and moving mirrors reflect the radiation back to the beam splitter.

AIM: To Study FTIR spectra of Ketoconazole and CMC

OBJECTIVE: To Perform FTIR Spectra of Ketoconazole and CMC We Need To Check Contradictions Ketoconazole and CMC

PLAN OF WORK:

Selection of API and Excipient

1) Ketoconazole Drug is Selected because it treats Fungal or Yeast Infection of the Skin.
CMC is Selected because it is commonly used in Beverages and Beverage Dry Mixes to provide Rich Mouthfeel.

II. LITERATURE REVIEW:

1. Pankaj Kumar (2011, 685-694)

In this article they had studied solid dispersion of antifungal drug ketoconazole were prepared with plutonic f-127 and PVP-30 with an intention to improve its dissolution properties of dispersion. were performed using released studies FTIR.

2. A M sugar, SGA Isip, JNGalgiani (1987 Dec, 31(12)):

In this article show that One hundred sixty patients were entered in two multicenter protocols to receive 400 to 2,000 mg of ketoconazole on a daily basis for non-meningeal or meningeal coccidioidomycosis. For 24 h after administration of all doses, mean concentrations in serum exceeded MICs for *Coccidioides immitis* (trough concentrations, greater than 1 microgram/ml).

3. Mdsaufur Rahman 1, Md. saif Hasan 2, Asissutradhar Nitai 2+ (20 April 2021, 13(8))

In this article they had studied Carboxymethyl cellulose (CMC) is one of the most promising cellulose derivatives. Due to its characteristic surface properties, mechanical strength, tunable hydrophilicity, viscous properties, availability and abundance of raw materials, low-cost synthesis process, and likewise many contrasting aspects, it is now widely used in various advanced application fields, for example, food, paper, textile, and pharmaceutical industries, biomedical engineering, wastewater treatment, energy

production, and storage energy production, and storage and soon. Many research articles have been reported on CMC, depending on their sources and application fields. Thus, a comprehensive and well-organized review is in great demand that can provide an up-to-date and in-depth review on CMC.

4. Tehseen Riaz, Rabia Zeeshan, Faiza Zarif, Kanwal Ilyas, Nawshad Muhammad (2018 vol 53 no 9, 703-746)

In this article they had studied about identifying chemical structural properties of collagen and Fourier transform infrared (FTIR) appears to be a technique of choice to study their chemical structure. This review aims to highlight the use of FTIR to study collagen-based biomaterials, using it for characterization of collagen extracted from various sources.

5. Paras Papneja, Mahesh Kumar Kataria, Ajay Bilandi. (ejpmr, 2015, 2(5), 990-1014.

In this article they are studied Ketoconazole is the member of imidazole class that is currently used in the treatment of systemic infections. Ketoconazole is classified in the Biopharmaceutics Classification Scheme (BCS) as a class II drug, since it has a high

permeability and poor solubility. Ketoconazole is best absorbed at highly acidic levels, so antacids or other causes of decreased stomach acid level will lower the drug absorption. Absorption can be increased.

FTIR:

- Fourier Transform Infrared Spectroscopy, also known as FTIR Analysis or FTIR Spectroscopy, is an analytical technique used to identify organic, polymeric, and, in some cases, inorganic materials. The FTIR analysis method uses infrared light to scan test samples and observe chemical properties.
- The first FT-IR spectrum was recorded in 1949 by Peter Fellgett. For several years thereafter it required hours to transform the
- interferometer to the useful spectrum using large and expensive computer systems
- The Michelson interferometer which had been invented in 1881 replaced the need for isolation of single wavelength bands as all wavelengths could be scanned simultaneously. The first FT-IR spectrum was recorded in 1949 by Peter Fellgett

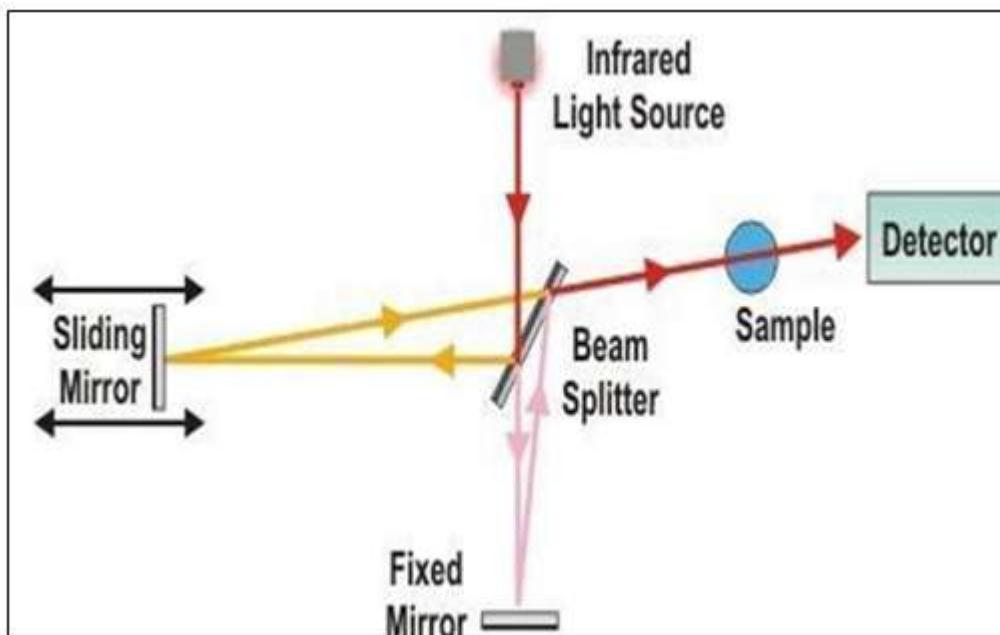


Fig.No.:-1.1FTIR

Instrumentation of FTIR Principle

- 1) FTIR relies on the fact that the most molecules absorb light in the infra- red region of the electromagnetic spectrum.
- 2) This absorption corresponds specifically to the bonds present in the molecule. The frequency range are measured as wave numbers typically over the range 4000-600 cm^{-1} .
- 3) The background emission spectrum of the IR source is first recorded, followed by the emission spectrum of the IR source with the sample in place.
- 4) The ratio of the sample spectrum to the background spectrum is directly related to the sample's absorption spectrum.
- 5) The resultant absorption spectrum from the bond natural vibration frequencies indicates the presence of various chemical bonds and functional groups present in the sample.
- 6) FTIR is particularly useful for identification of organic molecular groups and compounds due to the range of functional groups, side chains and cross- links involved, all of which will have characteristic vibrational frequencies in the infra-red range.

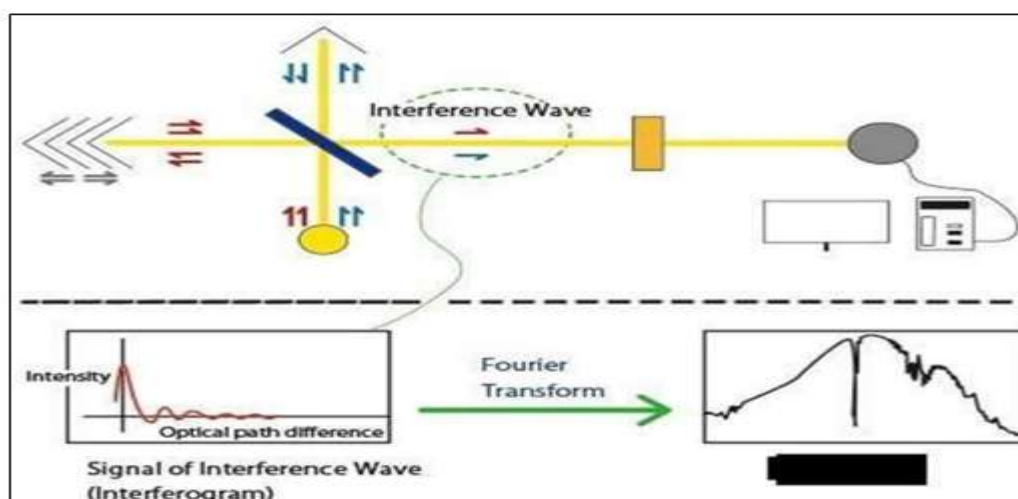


Fig.no.: -1.2 FTIR Principle

- 1 Source: Infrared energy is emitted from a glowing black-body source. Ends at the detector
- 2 Interferometer: beam enters the interferometer where the "spectral encoding" takes place
- 3 Interferogram: signal then exits the interferometer
- 4 Beamsplitter: takes the incoming beam and divides it into two optical .
- 5 Sample: beam enters the sample compartment where it is transmitted through or reflected off of the surface of the sample

Mull

3. Gas Samples:

Short Path Cell Long Path Cell

6) Detector:

The beam finally passes to the detector for final measurement

FTIR Detectors:

The two most popular detectors for a FTIR spectrometer are:

- 1) Deuterated triglycine sulphate (DTGS): By Is a pyroelectric detector that delivers rapid responses because it measures the change in temperature rather than the value of temperature. It operates at room temperature.
- 2) Mercury cadmium Telluride (MCT):
 - Is a photon (or quantum) detector that depends

SAMPLING TECHNIQUES:

1: Liquid Samples:

Neat sample
Diluted solution
Liquid cell

2. Solid Samples

Neat sample
Cast films
Pressed films KBr pellets

on the quantum nature of radiation and also exhibits very fast responses. It must be maintained at liquid nitrogen temperature (77 °K) to be effective

- In general, the MCT detector is faster and more sensitive than DTGS detector.
- 7) Computer: measured signal is digitized and sent to the computer where the Fourier transformation takes place
- 8) Moving mirror: in the interferometer is the only moving part of the instrument
- 9) Fixed mirror:

Advantages of FTIR

FT-IR Advantages

- 1) Fellgett's (multiplex) Advantage (High S/N ratio comparing with dispersive instruments)
 - FT-IR collects all resolution elements with a complete scan of the interferometer.
 - Successive scans of the FT-IR instrument are coded and averaged to enhance the signal-to-noise of the spectrum.
 - Theoretically, an infinitely long scan would average out all the noise in the baseline.
 - The dispersive instrument collects data one wavelength at a time and collects only a single spectrum.
 - There is no good method for increasing the signal-to-noise of the dispersive spectrum.
 - Cones Advantage High resolution, reproducibility and highly accurate frequency determination
 - Technique allows high speed sampling with the aid of laser
 - light interference fringes
 - Requires no wavenumber correction
 - Provides wavenumber to an accuracy of 0.01 cm^{-21}
3. Much higher throughput (Jacquinot or Throughput advantage):
 - Because not using classical monochromator.
 - Requires no slit device, making good use of the available beam
4. Better sensitivity.
 - In the interferometer, the radiation power transmitted on to the detector is very high which results in high sensitivity.
 - Allow simultaneous measurement over the entire wavenumber range

5. No Straylight

- Fourier Transform allows only interference signal to contribute to spectrum.
- Background light effects greatly lowered.
- Allows selective handling of signals limiting interference

6. Wavenumber range flexibility

Simple to alter the instrument wavenumber

Disadvantage of FTIR

- 1) Single-beam, requires collecting blank
- 2) Can't use thermal detectors – too slow
- 3) CO_2 and H_2O sensitive
- 4) Destructive
- 5) Too sensitive that it would detect the smallest contaminant
- 6) Easy to obtain inaccurate data if not analyzed correctly
- 7) Skilled spectroscopists needed for proper analysis and validation of results
- 8) Existing FTIR-based EPA methods are somewhat complex and often require adaptation.
- 9) Extraction of reactive components can be challenging
- 10) Requires routine maintenance
- 11) Mobility – heavy and bulky
- 12) Relatively expensive

Application of FTIR

- 1 Identification of simple mixtures of organic and inorganic compounds both as solids or liquids.
- 2 Identification of polymers and polymer blends.
- 3 Indirect verification of trace organic contaminants on surfaces
- 4 Analysis of adhesives, coatings and adhesion promoters or coupling agents.
- 5 Small visible particle chemical analysis.
- 6 Identification of rubbers and filled rubbers.
- 7 Determination of degrees of crystallinity in polymers (eg LDPE and HDPE).
- 8 Comparative chain lengths in organics.
- 9 Extent of thermal, UV or other degradation or depolymerisation of polymers and paint coatings.
- 10 Analysis of gaseous samples using a gas cell for the analysis or environmental monitoring.
- 11 Analysis of unknown solvents, cleaning agents and detergents.

Drug profile



Sr. No.	Properties	Ketoconazole
1	IUPAC Name	1-[4-[4-[[2-(2,4-dichlorophenyl)-2-(imidazol-1-ylmethyl)-1,3-dioxolan-4-yl] methoxy] phenyl] piperazin-1-yl] ethenone
2	Appearance	Solid
3	Colour	White crystalline powder
4	Molecular formula	C ₂₆ H ₂₈ Cl ₂ N ₄ O ₄
5	Molecular weight	531.4 g/mol
6	Melting point	148-152 °C
7	logP	4.35
8	Category	Antifungal agent
9	Dissolution constant	4.6
10	BCS Class	Class II (low solubility , high permeability)
11	Half life	2-8 hours
12	Bioavailability	Poor absorption by mouth (tab), negligible absorption through intact skin as topical bioavailability is about 0.5 -10%
13	Solubility	Freely soluble in DMSO. Soluble in methanol, dichloromethane, ethanol. insoluble in water. (In water, 0.29 mg/L at 20 °c)
14	Dose	200 mg taken once per day for up to 6 months.
15	Mechanism of action	Ketoconazole is an imidazole antifungal agent used in the prevention and treatment of a variety of fungal infections. It functions by preventing the synthesis of ergosterol, the fungal equivalent of cholesterol, thereby increasing membrane fluidity and preventing growth of the fungus.

TableNo.:-1

Ketoconazole is a drug used in the management and treatment of fungal infections. It is in the imidazole antifungal class of medications. This activity describes the indications, actions, and contraindications of ketoconazole as a valuable agent in treating fungal infections. This activity will highlight the mechanism of action, adverse event profile, and other key factors pertinent to members of the interprofessional team in the treatment of patients with fungal infection.

Objectives:

- 1 Identify the mechanism of action of ketoconazole.
- 2 Describe the adverse effects of ketoconazole.
- 3 Review the appropriate monitoring of ketoconazole.
- 4 Summarize some interprofessional team strategies for improving care coordination and communication to advance ketoconazole and improve outcomes.

Indications

Ketoconazole has approval for use in the treatment of fungal infections of the skin and systemic fungal infections. These include blastomycosis, histoplasmosis, paracoccidioidomycosis, coccidioidomycosis, and chromomycosis.

The use of this drug requires a careful risk-benefit analysis when selecting ketoconazole as the treatment of fungal infections. Clinicians should avoid using ketoconazole in the treatment of onychomycosis, cutaneous dermatophyte, and candida infections.

Mechanism of Action

Ketoconazole works as an antifungal agent by inhibiting the cytochrome P450 14 α demethylase enzyme. This enzyme is responsible for inhibiting the biosynthesis of triglycerides and phospholipids by fungi. More specifically, ketoconazole inhibits the synthesis of lanosterol, a necessary precursor for ergosterol biosynthesis. Ergosterol is needed to maintain the integrity of the membrane of fungi. [6] Without ergosterol, the fluidity of the membrane increases, which in turn prevents fungal growth. Ketoconazole, in high doses, can competitively bind to androgen receptors, such as that of testosterone and dihydrotestosterone, which can decrease the activity of testosterone and dihydrotestosterone in prostate cancer. Ketoconazole can also inhibit the enzymes 17- α hydroxylase and 17,20-

lyase, which are necessary for the synthesis of steroids in the adrenal cortex, including testosterone.

Administration

Ketoconazole is available in tablet form and as a topical agent in creams, foams, and shampoos. It is also available in mixture products. The oral form of ketoconazole is used for systemic administration and must be taken at least two hours before any antacids. The high pH of the gastric contents would decrease absorption, so appropriate timing of administration is paramount to its absorption and subsequent efficacy. Adult and pediatric patients with achlorhydria should be given ketoconazole tablets with an acidic beverage to decrease p_H and allow for optimal absorption. Topical ketoconazole is only for external use. It should not be ingested or used intravaginally. The eyes and mucous membranes should also be avoided. Patients should apply the cream and gel only to the affected area and the areas immediately surrounding it. The foam should be applied directly to the infected area to avoid melting in the hands. Handwashing is necessary after the application of the cream and gel to prevent any adverse reactions from the medication. The shampoo application should be slathered onto the scalp and rinsed thoroughly.

Adverse Effects

Systemic ketoconazole administration most commonly causes gastrointestinal side effects. These include nausea, vomiting, constipation, abdominal pain, dry mouth, flatulence, and tongue discoloration. It can also cause adrenal insufficiency due to its role in the inhibition of enzymes in the steroid synthesis pathway. Decreases in cortisol synthesis can lead to orthostatic hypotension. In high doses, it can also cause gynecomastia in males. Ketoconazole can cause severe liver injury and jaundice.

Contraindications

Ketoconazole is contraindicated in patients with acute or chronic liver disease due to its association with hepatotoxicity, which can be fatal. It is contraindicated in adrenal insufficiency because high doses of ketoconazole inhibit adrenocortical function. Ketoconazole should not be given to patients with a known hypersensitivity reaction to ketoconazole. Ketoconazole should never be co-administered with HMG-CoA reductase inhibitors because it can increase the risk of myopathy.

Ketoconazole is contraindicated in patients taking benzodiazepines because it can increase plasma concentrations and lead to sedation. Ketoconazole should never be administered to patients on antiarrhythmic drugs, cisapride, pimozone, quinidine, and ranolazine because it can cause QT prolongation and torsades de pointes. In patients with increased bone fragility, such as postmenopausal women and the elderly, ketoconazole should be used with caution to avoid the risk of fracture. The CYP3A4 liver enzyme metabolizes ketoconazole, and use requires caution in patients taking drugs that inhibit

CYP3A4 or are metabolized by CYP3A4.[19] Ketoconazole can also be present in breast milk, so breastfeeding is not recommended when using the drug.

Toxicity

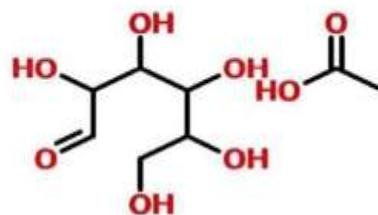
The Food and Drug Administration warns that oral dosing of ketoconazole can lead to hepatotoxicity and adrenal insufficiency and that ketoconazole-associated hepatotoxicity is common. There are many off-label uses for ketoconazole. Therefore, careful selection of ketoconazole as a treatment is necessary due to serious hepatotoxic side effects.[21]

EXCIPIENT PROFILE:-CMC

EXCIPIENTS: CMC (carboxyl methylcellulose)



Carboxymethyl cellulose



Carboxymethyl cellulose (CMC) is one of the most promising cellulose derivatives. Due to its characteristic surface properties, mechanical strength, tunable hydrophilicity, viscous properties, availability and abundance of raw materials, low-cost synthesis process, and likewise many contrasting aspects, it is now widely used in

various advanced application fields, for example, food, paper, textile, and pharmaceutical industries, biomedical engineering, wastewater treatment, energy production, and storage energy production, and storage and so on. Many research articles have been reported on CMC, depending on their sources and application fields.

SR.No	PROPERTIES	CMC
1.	IupacName	AceticAcid;2,3,4,5,6pentahydroxyhexanal
2.	Appearance	White to almost white, odourless, tasteless, Granular powder.
3.	Molecularformula	C8H16O8
4.	MolecularWeight	250000 g/mol

TableNo.: -1.2

III. RESULTS:

Jeevanrekha Analytical Services

Sample ID:KCMC PS 01

Method

Name:C:\Users\Public\Documents\Agilent\MicroLa
b\Methods\J R _ ATR.a2m

Sample Scans:140

User:Admin

BackgroundScans:140

Date/Time:05/06/2024 3:30:22 PM

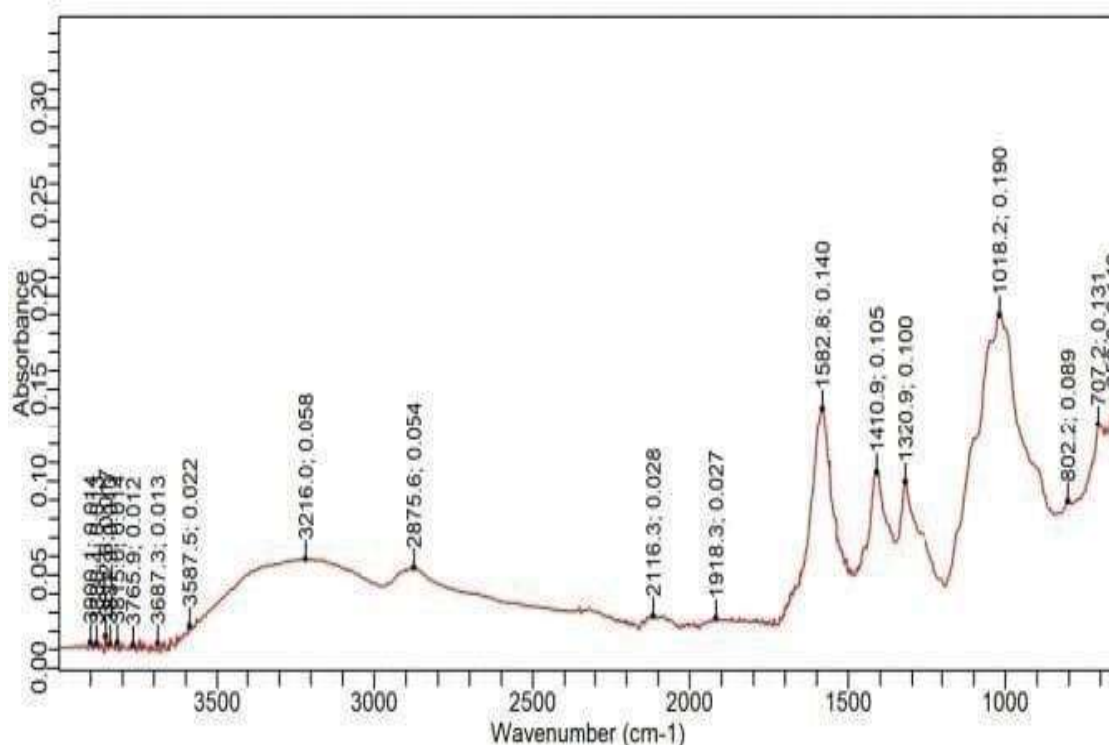
Resolution:4

Range:4000 -650

System Status:Good

Apodization:Triangular

File Location:C:\Users\Public\Documents\Agilent\MicroLab\Results\KCMC 2024-05-06T15-30-57.a2r



Figerno.:-1.1

Peak Number	Wavenumber (cm ⁻¹)	Intensity
1	659.77362	0.14034
2	707.23254	0.13085
3	802.15037	0.08925
4	1018.17026	0.18993
5	1320.92542	0.09961
6	1410.93371	0.10465
7	1582.76772	0.13974
8	1918.25316	0.02673
9	2116.27140	0.02787
10	2875.61406	0.05371
11	3216.00904	0.05830
12	3587.49780	0.02243
13	3687.32518	0.01332
14	3765.87786	0.01231
15	3814.97329	0.01376
16	3837.88450	0.01333
17	3852.61312	0.01698
18	3880.43387	0.01329
19	3900.07204	0.01360

TableNo.:-1.3

FTIR interpretation

Date: 11/05/24

Sample name: KCMC/PS/01		
peaks	actual	Functional groups
730-665	659,707	C=C bending (disub) c-i-s strong
800-860	802	C-H1,4 Disub(para)
1055-1000/1005-925	1018	Cyclohexane ring vibretation
1342-1250	1320	Strong CN stretching aromatic amine
1450	1410	Medium C-H bending alkyne(methyl group)
1610-1550	1582	Carboxylate (carboxylic acid salt)
2100-1800	1918,2116	Transition metal carbonyls
2800-3000	2875	Strong ,broad ,NH stretching (amine salt)
3570-3200	3216,3587	Hydroxy group ,H bonded OH stretch
4000-3000	3687,3765,3814,3837,3852,3880,3900	OH stretching, alcohol free

TableNo.:-1.4

IV. CONCLUSION:

Compatibility study of drug and excipient

- 1) FTIR (Fourier transform infrared spectroscopy) FTIR spectra of drug ketoconazole and excipient CMC. The drug ketoconazole contain functional groups C=C, C-H, Cyclohexene, CN, COOH. And excipient CMC contain functional groups C=C, C-H, Cyclohexene, CN, COOH. These two drugs are compatible with each other.
- 2) FTIR Spectroscopy Is a Rapid, Economical, Easy And Non-destructive technique wider Use In Clay mineral Investigation. The Progress In FTIR Spectrometer Designs Has Greatly Enhanced The Field Of Their application. Modern Instruments Offer High Sensitivity, Speedy Data Collection, Enhanced Spectral Precision And Reproducibility. In FTIR Spectra Of Ketoconazole and CMC Obtained Functional Groups C=C Bending (Disubstituted), C-H Stretching, C-H_{1,4} Disubstituted (Para), Cyclohexane Ring Vibration, Strong C-N Stretching Aromatic Amine, Medium C-H Bending Alkyne (Methyl Group) Carboxylate, Transition metal Carbonyls, Strong Band, N-H Stretching, Hydroxy Group, H Bond OH Stretch, OH Stretching, Alcohol free

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