

## Simultaneous estimation of Losartan and Atenolol by RP-High Performance Liquid Chromatography

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Abstract- Losar-beta is available for the treatment of hypertension. It contains losartan potassium(LS; 50mg) and atenolol (AT; 50mg). In the present study, simple, rapid, precise and accurate methods for the simultaneous estimation of these drugs have been developed and validated by HPLC. The method was validated with respect to its linearity, limit of quantitation (LOQ), limit of detection (LOD), precision, accuracy and robustness. HPLC was carried out with C-18 ODS column having 5µm, 250mm×4.60mm specifications along with a UV detector (235nm). The mobile phase used was acetonitrile: water: methanol (60:30:10) at a flow rate of 1ml/minute. Linearity was established by least square linear regression analysis and it was found to be linear over the concentration range of 5-50 µg/mL for LS and AT. LOQ was found to be 0.071 µg/mL for LS and 0.98 µg/ml for AT. The LOD was 0.002 µg/mL and 0.032 for LS and AT respectively. In precision studies, the % RSD was found to be 0.212 and 0.094 for LS and AT respectively. Percentage recovery was found to be 99.32  $\pm$  0.23 for LS and 99.34 $\pm$  0.28 for AT.

Keyword – losartan, atenolol, HPLC, method validation, simultaneous estimation.

#### 1. Introduction

Losar-beta is available in the market for the treatment of hypertension. It contains losartan potassium (LS; 50mg) and atenolol (AT; 50mg). Losartan is a agiotensin II receptor antagonist and atenolol is  $\beta 1$  receptor antagonist. These drugs are more effective in combination therapy as compared to monotherapy [1, 2]. The combinations of these drugs are marketed under various brand names as tablet dosage form. Literature reveals that very few spectrophotometric and chromatographic methods are available for the simultaneous estimation for these combinations, which are also too expensive. Hence, it was thought that a simultaneous estimation for these combinations can be carried out to make the methods more cost effective [3, 4].

High performance liquid chromatography is basically a highly improved form of column chromatography. HPLC is a method in which the compounds of a mixture are separated on an adsorbent column in a flowing system. Atenolol

Losartan potassium

#### 2. EXPERIMENTAL

A combination of atenolol and losartan was selected for analysis. These drugs are more effective in combination therapy as compared to monotherapy. Literature reveals that very few chromatographic methods are available for the simultaneous estimation for these combinations, which are also too expensive. Hence, it was thought that a simultaneous estimation for this combination can be carried out to make the method more cost effective.

#### Method development

Table 1: Mobile phase selection for Atenolol -

Losartan potassium						
Mobile phase	Ratio V/V	Flow rate	Retention Time in min.		Conclusion	
		(mL/ min)	ATN	LOS	-	
ACN: MeOH	50:50	1.0	5	28	Splitting of peak observed and elution time is more.	
ACN: MeOH :Water	33:2: 65	1.0	2.05	25	Elution time is slightly decreased and splitting is increased.	
ACN: Water: MeOH	60:30 :10	1.0	2.18	5	Peak was sharp and suitable	



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The mobile phase, most suitable for analysis was acetonitrile: water: methanol 60:30:10 flow rate was 1.0 mL/min and detection wavelength was 235 nm.

#### Selection of separation variable

Considering the theoretical information and after several trials for mobile phase selection and flow rate the following separation variables were selected which were constant during whole experiment are shown in Table 2

Table 2: Selection of separation variable

Table 2: Selection of separation variable				
Variable	Condition			
Column				
Dimension.	250mm x 4.60mm			
Particle Size	5μ			
<b>Bonded Phase</b>	Octadecylsilane (C <sub>18</sub> )			
Mobile Phase	-			
Acetonitrile(HPLC)	60%			
Water	30%			
Methanol	10%			
Flow Rate	1.0 mL/min			
Temperature	Room Temperature(27-			
	28°C)			
Sample Size	20μl			
<b>Detection wavelength</b>	235nm			
Retention time				
Atenolol	2.18			
Losartan	5.00			

#### Preparation of standard solution

**Atenolol:** Atenolol (100mg) was accurately weighed and transferred to a 100 mL volumetric flask and dissolved in mobile phase, 2.5mL was taken and further diluted to 25mL with mobile phase. Concentration of stock A is  $100 \ \mu g/mL$ .

**Losartan:** Losartan (100mg) was accurately weighed and transferred to a 100 mL volumetric flask and dissolved in mobile phase, 2.5mL was taken and further diluted to 25mL with mobile phase. Concentration of stock B is 100 µg/mL.

**Mixed standard:** From the stock solutions A and B, aliquots were diluted up to 10 mL with a mobile phase to obtain the concentrations given in Table 3.

Table 3: Preparation of mix standard

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S.No.	Concentration of atenolol (µg/mL)	Concentration of losartan potassium(µg/mL)
1	5	5
2	10	10
3	15	15
4	20	20

#### Calibration graph

To find the linearity, a series of dilution ranging from 2-200  $\mu$ g/mL (2, 5-50, 100 and 200) for atenolol and losartan potassium were prepared in the same manner as described above. All the solutions were filtered through a 0.22 $\mu$ m membrane filter and injected. The chromatograms were recorded. A calibration graph was plotted between the area under curve Vs respective

concentration. Regression equation was derived and results are as shown in Table 4 and 5; Fig.1 and 2.

Table 4: Calibration curve data for atenolol

S.No.	Concentration (µg/mL)	AUC
1	5	100562
2	10	209968
3	15	301376
4	20	410019
5	25	509214
6	30	612636

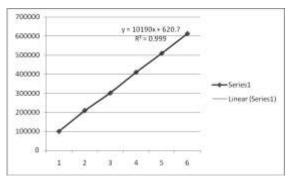


Fig. 1 Calibration graph of Atenolol

#### **Regression Equation**

Y = mx + c

Where, Y = AUC,

m = Slope (10190)  $X = Conc. in \mu g/mL$ ,

C = Intercept (620.7) **AUC** = 10190 conc. + 620.7

Correlation coefficient  $(r^2) = 0.999$ 

Table 5: Calibration curve data of losartan potassium

S.No.	Concentration (µg/mL)	AUC
1	5	282900
2	10	561006
3	15	840988
4	20	1124548
5	25	1429556
6	30	1682122

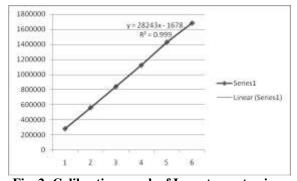


Fig. 2: Calibration graph of Losartan potassium



#### **Regression Equation**

Y = mx + c

Where Y = AUC, m = Slope (28243), X = Conc. in  $\mu$ g/mL, c = Intercept (-1678)

AUC = 28243 Conc.-1678

Correlation coefficient  $(r^2) = 0.999$ 

#### Chromatogram

The retention time of atenolol and losartan potassium were observed at 2.177 min. and 5.0 min. The complete elution of both drugs was achieved in 7 min. at 235 nm. Chromatogram of atenolol and losartan potassium observed is shown in Fig. 3.

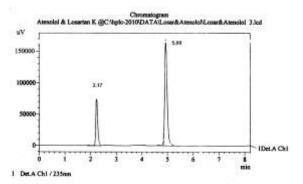


Fig. 3: Chromatogram of Atenolol and Losartan potassium

HPLC Peak table of atenolol and losartan potassium

Name	Reten- tion time	Area	Height	Area %	Height %
AT	2.177	419062	79982	26.216	33.10
LS	5.000	1136129	170002	73.784	66.90
		1555191	249984	100.00	100.00

## Validation of developed method

#### Linearity

Different dilutions of atenolol and losartan potassium ranging from  $1\mu g/mL$  to  $50 \mu g/mL$  of were prepared and detected by HPLC. Concentration of Atenolol and Losartan potassium at 235 nm found linear in the range of  $5\mu g/mL$ - $50\mu g/mL$ .

## Accuracy

The recovery studies were performed to validate the accuracy of the developed method with different concentrations of preanalyzed sample solution of tablet. Varying concentration of the standard drug was added and then its recovery was analyzed and results are shown in Table 6 and 7.

#### Intermediate precision

Mixed standard dilutions of Atenolol and Losartan potassium were prepared and their analysis was carried

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out on different days in different concentrations and analyst to analyst intermediate precision was done. The results were validated statistically and shown in Table 8 and 9.

#### **Robustness**

As per ICH guidelines, small, but deliberate variations in concentration of the mobile phase were made to check the method's capacity to remain unaffected.

The ratio of mobile phase was acetonitrile: water: methanol 60:30:10(v/v/v) Change in ratios of mobile phase from 60:30:10 (v/v/v) to 61:29:10 (v/v/v) and 59:31:10 (v/v/v) was done.

These variations did not cause any significant difference in resolution of HPLC method and the results are shown in Table 10.

#### **Limit of Detection (LOD)**

Based on the standard deviation of the response and slope The detection limit is express as:

$$LOD = \frac{3.3 \sigma}{S}$$

Where  $\sigma$  = the standard deviation of the response

S = the slope of the calibration curve.

For Atenolol it was found to be  $0.032\mu g/mL$  and for losartan potassium, it was  $0.002\mu g/mL$ .

### Limit of Quantitation (LOQ)

Based on the standard deviation of the response and the slope

The quantization limit is expressed as:

$$LOQ = \frac{10 \sigma}{S}$$

For atenolol it was found to be 0.98  $\mu g/mL$  and for losartan it was  $0.071 \mu g/mL$ 

#### Stability

Both the drug solution containing  $10\mu g/mL$  was analyzed by HPLC method at 1, 2, 3, 5 and 24 hours after preparation. The behavior of the analyte remained unchanged up to 24 hours from its preparation. All the measurements were made at room temperature (27- $28^{\circ}C$ ).

#### **Analysis of marketed tablets**

Commercial formulations of atenolol and losartan potassium (Losar-beta) were selected for analysis. Twenty tablets were weighed, their coating was removed using ethyl acetate and powdered separately. Weight equivalent to 10mg of atenolol and losartan potassium was dissolved in 10mL mobile phase and then sonicated for 15min. the supernatant was filtered through 0.22 µm membrane filter. Different concentration of solutions were prepared by serial dilution technique, as per



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standard and each dilution was analyzed. The result of analysis of marketed formulation is shown in Table 11.

#### **Results and discussion**

The present work comprised of development of an analytical method for the simultaneous estimation of atenolol and losartan by reverse phase high performance liquid chromatography, as well as, validation of the developed method. The commercially available tablet dosage forms selected for the estimation is Losar beta of Unichem Ltd. containing Atenolol-50 mg and LosartanPotassium-50mg.

The calibration curve was plotted between concentration and AUC measured at the selected wavelength of 235 nm. The concentration of drugs in the tablet was found by using slope and 'Y' intercept of linearity curve. Validation challenges showed that the methods show reproducibility when carried out by different persons, in the same or different laboratories using different reagents, etc.

Considering the solubility, solvent triangle optimization, column performance, peak performance, the best wavelength and the mobile phase chosen was acetonitrile: water: methanol 60:30:10(v/v/v). The wavelength selected for analysis is 235 nm.

# **Developed equations for estimation atenolol and losartan (Losar-beta)**

For Atenolol - AUC = 10190 conc. + 620.7 For Losartan - AUC = 28243 conc. - 1678

#### Validation of the HPLC Method

The method was validated with respect to its linearity, limit of quantitation (LOQ), limit of detection (LOD), precision, accuracy and robustness.

Table 6: Recovery data for accuracy of Atenolol

Level of standard	Amount found in three replicate			%Recovery±SD
addition (%)		(mg)		
90	49.82	49.98	49.86	99.88±0.12
100	49.48	49.76	49.88	99.34±0.28
110	49.28	49.98	49.94	99.65±0.32

Table 7: Recovery data for accuracy of Losartan

Level of standard	Amount found in three replicate			%Recovery±SD
addition (%)		(mg)		
90	49.68	49.58	49.82	99.48±0.18
100	49.47	49.65	49.88	99.32±0.23
110	49.64	49.86	49.98	99.65±0.18

Table 8: Intermediate precision: day-to-day

Atenolol			Losartan		
Conc.	Day-1		Conc.	Day 1	Day-2
$(\mu g/mL)$			(µg/mL)		
5	50.28	50.18	5	50.22	50.42
10	50.18	50.12	10	49.86	50.28
20	50.02	49.98	20	50.06	49.89
Mean	50.16	50.093	Mean	50.05	50.20
Mean		50.13	Mean		50.12
S.D.		0.05	S.D.		0.11
%RSD		0.094	%RSD		0.212

Table 9: Intermediate precision: Analyst-to-Analyst

A	tenolol		L	osartan	
Conc. (µg/mL)	A-1	A-2	Conc. (µg/mL)	A-1	A-2
5	50.32	50.12	5	50.18	50.28
10	50.10	49.78	10	49.82	49.84
20	50.20	50.26	20	50.08	49.98
Mean	50.21	50.05	Mean	50.02	50.03
Mean S.D. %RSD		50.13 0.100 0.100	Mean S.D. %RSD		50.03 0.002 0.003

A-1 = Analyst 1, A-2 = Analyst 2

**Table 10: Determination of Robustness** 

Drug con	ncentration found a variation	fter mobile phase
60:30:10	61.29.10	59:31:10

60:30:1	0	61:29:1	0	59:31:1	0
ATN	LOS	ATN	LOS	ATN	LOS
50.27	50.20	50.12	49.78	49.98	49.98
50.16	50.16	49.88	50.26	50.23	50.10
50.30	50.16	49.68	50.22	50.12	50.24

Table 11: Result of analysis of Losar-beta tablet
Amount Conc. found % Found

-	present (μg/mL)		(µg/mL)			
	ATN	LOS	ATN	LOS	ATN	LOS
	50	50	50.26	50.25	100.44	100.56
	50	50	50.20	49.88	100.32	99.82
	50	50	49.98	49.98	99.96	99.96
				Mean	100.24	100.11
				S.D.	0.177	0.278
				%RSD	0.177	0.278



Table 12: Validation data for the developed RP-HPLC method

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Validation	Losar-Beta					
Parameters						
	Atenolol	Losartan				
Linearity (r <sup>2</sup> )	0.9994	0.9994				
Accuracy (%SD)	0.1200	0.1000				
Precision (%SD)						
Analyst variation	0.0470	0.1060				
Inter day Variation	0.1000	0.0020				
LOD	0.0320	0.0021				
LOQ	0.9800	0.0700				

#### 4. CONCLUSION

The HPLC method developed is simple, precise, rapid, selective and economical for the simultaneous estimation of atenolol and losartan potassium in solid dosage form. It can also be used for the analysis of these drugs in biological fluids and in quality control laboratories.

#### REFERENCE

- [1] Everett B. M., Robert J., Glynn, Eleanor Danielson, and Paul M Ridker, Combination therapy versus monotherapy as initial treatment for stage-2 hypertension, *Clinical Therapeutics* 30 (4), 2008, 661-671.
- [2] Fogary Roberto, Zoppi Annalisa, Mugellini Amedeo, Preti Paola Destro Maurizio, Rinaldi Andrea and Derosa Giuseppe; Effectiveness of hydrochlorothiazide in combination with telmisartan and olmesartan in adult with moderate hypertension not controlled with monotherapy, a prospective, randomized, openlevel, blinded end pont, parallel arm study, *Current Therapeutic research*; 69, I, 2008, 1-15.
- [3] Panderi I.E. Simultaneous determination of benazepril hydrochloride and hydrochlorothiazide in tablets by second-order derivative spectrophotometry, *J. Pharm. Biomed. Anal*, 21, 1999, 257-265.
- [4] Erk N. Analysis of binary mixtures of losartan potassium and hydrochlorothiazide by using high performance liquid chromatography, ratio derivative spectrophotometric and compensation technique, *J. Pharm. Biomed. Anal.* 24, 2001, 603–611.
- [5] Jeffery, G.H., Bassett, J., Mendham, J. and Denrey, R.C., In; "Vogel's Text book of Quantitative Chemical Analysis" 5<sup>th</sup> Edn., Longman Group U.K. Ltd., England, 1989, 3, 6-14.
- [6] Sethi, P.D., In; "Quantitative Analysis of Drugs in Pharmaceutical Formulations" 3<sup>rd</sup> Edn., CBS Publishers and Distributors, New Delhi, 1997, 9.
- [7] Beckett, A.H. and Stenlake, J.B. "Practical Pharmaceutical Chemistry" Vol. II, 4<sup>th</sup> Edn., CBS Publishers and Distributors, New Delhi, 1989, 276-99.

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