

Comprehensive investigation of Mefenamic Acid Dissolution Properties and Mechanisms of Absorption



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Abstract

Mefenamic acid, sometimes known as Mama, is a commonly used NSAID for sedation. Due to Mama's low water solvency and other factors, The normal negative effects of NSAIDs are also present. The purpose of this research was to improve the water solubility of Mama in order to boost its bioavailability and impact digestion. Solid dispersions of Mama were made by employing polyethylene glycol 6000 and varying types (stearate, D-1670, palmitate, P-1670, and laurate, D-1216) and amounts of sucrose esters as transporters. The absence of precious stones from Mama is confirmed by the X-ray diffraction results. Based on the results of disintegration tests conducted on fake gastric juice, the component containing 10% D-1216 significantly increased water solvency. Despite the dissolution difference, Mama showed a high apparent penetrability coefficient across human Caco-2 digestive epithelial cell layers, and the addition of chemicals did not increase drug entrance...

Keywords: mefenamic acid, sucrose esters, PEG 6000, solid dispersion, Caco-2 cells

Introduction

Most often, disintegration is described as an interaction where a solid material is solubilized into the dissolvable to produce an outcome. Since the medication retention process from solid measurements structures (particularly for drugs given by oral course) The drug disintegration trademark is a crucial quality boundary for ensuring the in vivo performance of solid medication products, as it depends on the delivery of the medication substance from the medication item, the disintegration or solubilization of the medication under physiological circumstances, and the porousness of the medication item. The underlying concept of the first two indicated phases suggests that in vitro disintegration may be significant to the prediction of in vivo execution. Mefenamic acid, also known as [2-[(2,3-dimethylphenyl amino)benzoic acid], is a common NSAID used to treat moderate-to-severe pain. It is a derivative of anthranilic acid. Based on the biopharmaceutical arrangement framework, mefenamic acid is placed in class II. There is very little solubility in water, yet it is very impermeable. The oral bioavailability of this drug is high, at 90% to 100%. Medication absorption rates in the high or acceptable range are crucial for BCS

class II medications, and here is where the disintegration cycle comes in. There is a dependable oral administration measurement method for mefenamic acid in Indonesia, where it sees widespread use (case and caplet). The quality of solid measuring structures for mefenamic acid can now be assessed using any of two compendial disintegration testing procedures that have just been certified. Disintegration testing of mefenamic acid is the primary approach, and it is outlined in both USP 37 and the 2010 Chinese Pharmacopeia (PPRC 2010).

The fifth edition of the Indonesian Pharmacopeia adopts the USP approach in the interim. There are a few differences between PPRC strategy and USP technique. Mefenamic acid's solid measurement structure is subjected to a disintegration test by USP exclusively for containers. In this test, USP recommends using a type 1 (bin) test device for disintegration, rotating at 100 rpm, with disintegration medium consisting of 900 mL of tris buffer, pH 9, containing 1% sodium lauryl sulfate. After 45 minutes, the suggested acceptance requirement is for at least 75% (Q) of the marked amount of mefenamic acid to have degraded. PPRC performs a disintegration test on both the caplet/tablet and the mefenamic acid container. PPRC employs a contraption type 2 (a paddle) with a pivot speed of 75 rpm and 800 liters of phosphate cradle pH 8 with 40 mL of ethanol serving as the disintegration medium. In 45 minutes, the amount of mefenamic acid is degraded by at least 70% (Q) and at least 60% (Q), respectively., according to the acknowledgment models for mefenamic acid in infinite case measuring structures. For the quality requirements of solid measuring structures for mefenamic acid, the fifth edition of the Indonesian Pharmacopeia (FI V) competes with the USP. Only the mefenamic acid container measurement construction should be tested for disintegration trademark, whereas the crumbling test takes the role of the disintegration test in tablet and caplet dose structures. The main factor limiting the ingestion cycle of such medications in the current situation is the drug's BCS class 2 placement, which may be inferred from the rate of disintegration. Additionally, Indonesia has not yet recorded nonexclusive mefenamic acid (solid oral) data structures in that mindset to undergo a bioequivalence test..

Results and Discussion

Solubility test

According to the results of the solubility test (shown in Fig. 1), mefenamic acid was most soluble in USP medium (at a concentration of roughly 2 mg/mL). USP media had a solubility roughly fourfold more than PPRC medium (approximately 0.5 mg/mL) and approximately thirtyonefold greater than FaSSIF medium (0.06 mg/mL). These results suggest that a 900-mL volume of USP or PPRC disintegration medium is optimal for dissolving a high-dose drug (500 mg) (mefenamic acid). Meanwhile, the FaSSIF medium is not ideal for the drug's disintegration study due to the poor solubility of mefenamic acid in that medium. Many different solvents and disintegration media have been tested to determine how mefenamic acid dissolves, and the findings have varied. The poor water solubility of mefenamic acid is approximately 0.004 mg/mL at 37 °C and 0.2 mg/mL at 25 °C. While mefenamic acid is insoluble in water, it dissolves well in ethanol (14.8 mg/mL at 25 °C) and polyethylene glycol 400 (11.5 mg/mL at 25 °C), two natural water-miscible solvents. In PPRC, the medicine is employed as a co-dissolvable for the mefenamic acid disintegration medium due to its high natural water-miscibility dissolvability. The swelling of the hydrophilic surfactants Brij35, sodium lauryl sulfate (SLS), and Tween 80 improved the drug's solubility in water. The medication's solubility was improved with the addition of SLS in concentrations between 2 and 10 percent, reaching a maximum of 0.85 mg/mL. The solubility of mefenamic acid in water was almost drastically affected by the pH level. Since mefenamic acid is an acidic medication, its solubility in water increased as the pH rose. It's possible that the solubility of the drug at 37°C and pH 9.0 is larger than 0.1 mg/mL. The expansion of SLS for the mefenamic acid case's disintegration mechanism in the USP monograph provides further support for the approach, as does the pH influence...

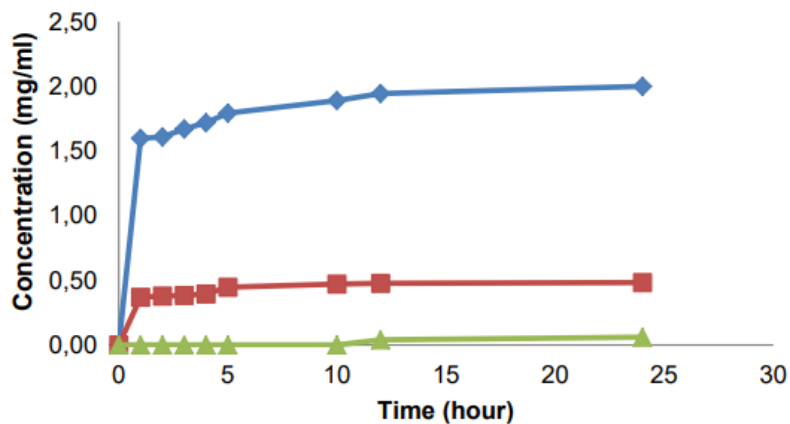


Fig 1. Solubility test results in USP (—◆—), PPRC (—■—) and FaSSIF (—▲—) medium.

Conclusion

It is significant that drugs belonging to the BCS II class have their water dissolvability increased. Due to Mama, Using hydrophilic auxiliary molecules, these methods can also reduce the drug's potent antagonistic effects while improving the drug's biopharmaceutical properties. The degree to which porousness is influenced by particular APIs could be altered by the addition of aiding compounds that boost water solubility. Several Mama designs were put to the test, and the correlation between their solvency and their penetrability was measured. PEG 6000 polymer with sucrose ester surfactants and Mama put inside.. According to the Gompertz-capability bounds and the findings of the disintegration test, the 10% D-1216-containing item produced the best results. Additionally, this item turned out to be quite probably the best strategy in the Caco-2 cell poisoning test. After 120 minutes, Mama's disintegrated volume only slightly increased, but after 30 minutes, there was a noticeable increase in Mama's dissolvability. Therefore, under in vivo settings, the higher shredded amount of Mama that is available for retention may speed up Mama's assimilation.

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