

International Journal of Research in Pharmacy and Pharmaceutical Sciences

www.pharmacyjournal.in

ISSN: 2455-698X

Received: 02-05-2023, Accepted: 17-05-2023, Published: 02-06-2023

Volume 8, Issue 2, 2023, Page No. 131-136

Comparison between impurity in API and formulation: A review

Jadhav Dhiraj Rajaram, Swapnali Pharande

Delonix Society's Baramati College of Pharmacy, Barhanpur, Maharashtra, India

Abstract

In medicine discovery process, confirmation of safety and efficacity of medicine are essential parameters and unexpectedly pharmaceutical companies lay stress upon these, still, every medicine which is retailed is associated with the several determinate quality parameters from all of them some are identification, quantification and junking of contaminations at each step of development, lately, there has been an increased stress on contamination profiling of APIs and expression. According to ICH guidelines, an contamination is any element of medicine substance that isn't a part of chemical reality and goods chastity of active constituents. From above description, it becomes easy to realize that contaminations are necessary and will be present in minor quantities and accordingly colorful nonsupervisory bodies follow workable guidelines to come up with admissible limits of contaminations, to launch a medicine product into the request, contaminations aren't always inescapably inferior from active component and occasionally may have independent pharmacological or toxicological parcels, still in maturity of the cases they're anuisance and should be elided. In this review composition, contaminations, their types, their characterization and operations have been described.

Keywords: comparison between impurity, pharmaceutical companies, regulatory guidelines

Introduction

Consumer 's protection depends on a products safety, characteristics, chastity of the factors. All these are regulated by The U.S. Food and Drug Administration (FDA). Small quantum of contamination can change the efficacity, toxin of any pharmaceutical composites. International Conference on Harmonization said that contaminations are undesirable chemicals that remain with the Active Pharmaceutical constituents (APIs) or develop during expression or the develop upon ageing of both APIs and formulated APIs The major challenge of any assiduity is to produce quality product and for that reason, it's necessary to conduct vigorous quality control checks in order to maintain the quality and chastity of affair from each assiduity. Raw accoutrements, manufacturing system, crystallization and sanctification process play an important part to maintain the chastity of any product. Analytical chemistry which is related to the experimental generalities in assiduity also changes with time. strict limits of chastity and contamination is specified by the colorful pharmacopoeias. ultramodern separation styles are advanced as these styles contemporaneously separate and quantify the factors to make the separation and characterization of As safety contaminations easier. and quality pharmaceutical products can be affected by contaminations present in the Active Pharmaceutical constituents (APIs) the contamination profile study of the API to be used in the manufacturing of medicine substance. therefore, contamination profiling like identification, insulation & characterization are done and their threshold values misbehave with the limits set and specified by sanctioned bodies. Issue related to contaminations addressing must be the same for each and every sectors and there must be aunified system to insure it. International Conference on Adjustment (ICH) has published guidelines for confirmation styles for analysis of contaminations in new medicine products, new medicine substances, residual

detergents & microbiological contaminations for enrollment of medicinals. ICH defines contaminations as substance in the API itself. For pharmaceutical products, contaminations are defined as substances in the product that aren't the API itself or excipients used to manufacture it. i.e. contaminations, are unwanted chemicals that remain within the expression or API in small quantities which can impact QSE, thereby causing serious health Hazards. According to International Conference on Adjustment (ICH) guidelines relating and characterizing all contaminations that are present at a position of 0.10 or further are recommended. Different pharmacopoeias similar as United States of Pharmacopoeia (USP), British Pharmacopoeia (BP).

Regulatory guidelines on impurities in an API and/or in formulation

Monitoring and controlling of contaminations implies different effects. Thus simple language should be used to address questions related to contaminations. The United States food and medicine administration (US- FDA) has championed the guidelines prepared by International Conference on Adjustment (ICH). The ICH guidelines for contaminations were developed with common sweats of colorful controllers similar as European Union (EU), Japan and United States and they help in icing harmonious demand of data that should be submitted to colorful nonsupervisory agencies. The guidelines aren't only to prop the guarantors of

New Drug Application (NDA) or shortened New Drug Application (ANDA) with information that should be submitted along with their operations, but also assists FDA pundits and field investigators in harmonious perpetration and interpretation of regulations. The colorful nonsupervisory guidelines are as follows:

a. ICH guidelines "Stability Testing of New Drug Substances and Products"- Q1A.

- ICH Guidelines "Impurities in New Drug Substances"-Q3A.
- ICH Guidelines "Impurities in New Drug Products"-Q3B.
- d. ICH Guidelines "Impurities: Guidelines for Residual Solvents"- Q3C.
- e. US-FDA Guidelines "NDAs- Impurities in New Drug Substances".
- US-FDA Guidelines "ANDAs- Impurities in New Drug Substances".

g. Australian Regulatory Guideline for Prescription of Medicines, Therapeutic Governance Authority (TGA), Australia.

Classification (As per ICH)

- A. Organic impurity
- B. Inorganic impurity
- C. Residual solvent
- D. Synthesis related impurity
- E. Formation related impurity

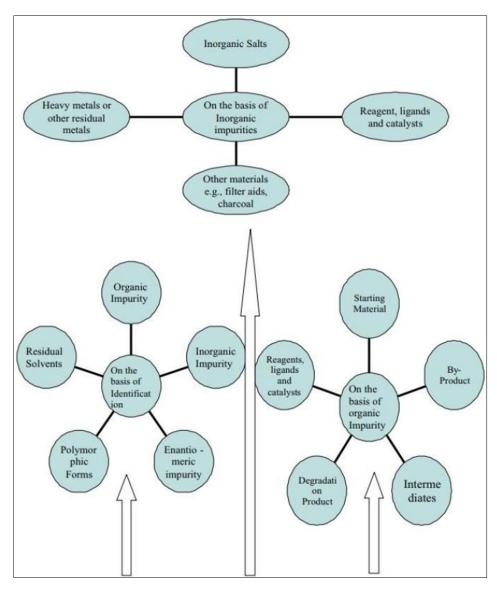


Fig 1: Flow chart representation various kinds of impurities.

A. Organic impurities

These contaminations arise during manufacturing process and/ or storehouse of medicine substance. These include starting material contaminations, by-product contaminations, declination contaminations and enantiomeric contaminations.

Starting material or intermediate impurities

Starting accourrements (substantially from isomeric contaminations) and interceders (deficient response or excess reagent used) are chemical structure blocks used to form the final form of a medicine substance. If left unreacted or when attained with the end product due to indecorous junking these are considered as contaminations.

still despite relinquishment of multitudinous preventative measures, there are always chances of having residuals and unreacted starting accoutrements remaining in the final product as.

contamination. For illustration during the last step in conflation of Baclofen- when beta-(p-chlorophenyl) glutarimide reacts with sodium hydroxide result at room temperature, the yield of p- chlorophenyl glutaric acid is conflation related contamination. Presence of isomeric 4-trifluoromethyl contamination in 3- trifluoromethyl- α ethylbenzhydrol Flumecinol) is a result of the presence of 4-trifluoromethyl bromobenzene contamination in 3-trifluoromethyl bromobenzene (starting material of conflation). In conformation of Tipranavir, aniline is the

intermediate in the last step of the conflation. Due to the analogous structures of aniline and the final emulsion, it's delicate to completely exclude it in the posterior sanctification step. Accordingly, it appears in the medicine substance at around In the Paracetamol bulk, a limit test for the p- aminophenol is accomplish because it could be a starting material for the one manufacturer or an intermediate for the others.

By- products

A emulsion with 100 yield is rare, so there are always chances of by- products. They are formed through variety of side responses similar as rearrangement, over response, isomerization, dimerization and unwanted responses between starting accoutrements or intermediate with catalyst or reagent. In Paracetamol conflation, diacetylated Paracetamol is formed as a by- product.

Fig 2

Degradation product

Degradation products are formed by corruption of final product due to indecorous storehouse of expression or ageing. illustration declination of Hydrochlorothiazide to its starting material i.e. Di sulfonamide.

$$\begin{array}{c|c} H_2N \overset{O}{\Rightarrow} & O & O \\ O & S & NH \\ CI & NH \\ \end{array}$$

$$\begin{array}{c} -(CH_2O)n & H_2N \overset{O}{\Rightarrow} & O \\ O & NH_2 \\ \end{array}$$

$$\begin{array}{c} O & S & NH_2 \\ CI & Disulfonamide degradtion product \\ \end{array}$$

Fig 3

Other medicines susceptible to declination are Penicillin and Cephalosporin. Presence of beta lactam ring and nascence amino group in the C6/ C7 side chain plays a critical part in their declination. Penicillin G and penicillin V in waterless result are degraded by β -lactamase to its penicilloic acids and penilloic acids. 7- Amino cephalosporanic acid is produced by enzymatic and chemical declination of cephalosporin C. Ibuprofen is degraded to 2-(4-form ylphenyl) propionic acid, 2-(4-isobutylphenyl) propionic acid, 2-(4-ethylphenyl) propionic acid, 2-(4-ethylphenyl) propionic acid, 4- is obutylacetophenone, 2-(4-n-propylphenyl) propionic acid and 2-(4- n- butylphenyl) propionic as contaminations.

Enantiomeric impurities

In numerous cases, single enantiomeric form of a chiral medicine is an advanced chemical reality that can show advanced pharmacological and remedial indicator with a more favorable adverse effect profile. For a single enantiomeric medicine, the other stereoisomers of medicine are considered as organic contamination. exemplifications include retailed single isomeric medicines similar as Levofloxacin (S-ofloxacin), Esomeprazole (S-omeprazole).

B. Inorganic impurities

These are attained in bulk medicine expression during manufacturing process. They're generally linked and known in nature. They include contaminations like heavy essence contaminations, residual solvent contaminations and other material contaminations similar as sludge aids.

Reagents, ligand and catalysts

veritably infrequently do we come across these types of contaminations. Raney Ni is used as the catalyst in a most reduction responses can occasionally lead to conformation of contaminations along with asked products like in case of conflation of Linezolid. Pyridinium is formed as contamination in the conflation of Mazipredone therefore pyridine is used as catalyst.

Heavy metal

Water is used in utmost manufacturing processes, but unfortunately it acts as a major source of heavy essence. Ag, Cd, Na, Mn and Mg introduced with the response media can lead to hydrolysis of the medicine. For case, hydrogenated canvases and fats are produced by essence catalysts which results in high attention of essence in the final product due to filtering process. For the checking of impurity of heavy essence in pharmaceutical product demineralized water and glass lined reactors be used.

Filter aids

colorful filtering aids are used in conflation of medicines and they can be a source of contaminations. Accordingly, regular monitoring of filaments and black patches in medicine needs to be conducted. Centrifuge bags and actuated watercolor can also act as source of contaminations.

C. Residual solvent

These are organic or inorganic liquids which are generally used in colorful manufacturing processes. They may modify parcels of certain composites or can be dangerous to mortal health. Some liquids parade poisonous geste so they need to be excluded still it's a veritably tedious task to negotiate, as trace quantities are generally delicate to descry and remove. For the discovery of residual detergent, gas chromatography is used because they're substantially unpredictable in nature. Nonvolatile detergents are converting to unpredictable detergents by chemical derivatization. Gas chromatographic

ways are used to determine chastity of toluene, acetone, methanol, dichloromethane and also to quantify main factors of each organic detergent. Residual detergents with their bracket and admissible limits are listed below.

Class 1

These type detergents aren't employed in manufacturing of medicine substances because of their poisonous nature. If use of these detergents is necessary also their operation must be confined to their separate limits. (Table 1)

Table 1: Class 1 residual solvents.

S. No.	Residual solvent	Concentration limit (ppm)
1.	Benzene	2 (Carcinogenic)
2.	Carbon tetrachloride	4 (Toxic)
3.	1,1 Dichloroethane	8 (Toxic)
4.	1,2 Dichloroethane	5 (Toxic)
5.	1,1,1 Triichloroethane	1500 (Environmental hazard)

Class 2 These types of solvents should be limitedly using the pharmaceutical products because of inherent toxicity. (Table 2).

Table 2: Class II solvents with their permissible daily exposure limits.

S. No.	Residual solvent	Permissible daily exposure (mg/day)	Concentration limit (ppm)
1.	Acetonitrile	4.1	410
2.	Chloroform	0.6	60
3.	1,2 Dioxane	3.8	380
4.	Pyridine	2	200
5.	Toluene	8.9	890

D. Synthesis related impurity

An contamination formed during conflation of medicine, indeed in minor quantities, could eventually be present in final product. thus, conflation related contaminations bear careful monitoring at every step, to minimize quantum of contamination that can formed. (25) During the conflation of Ezetimibe, an contamination, linked as (3R, 4S)- 3-((S)-3-(4-fluorophenyl)-3-hydroxypropyl)-4(4-hydroxyphenyl) 1-phenylazetidin-2-one, is called as desfluoroezetimibe (lactam- related) Impurity.

E. Formulation related impurity

After conflation of API, the coming step is to formulate it with excipients into different lozenge forms like results, capsules, tablets, aerosols, semi-solids and other new medicine delivery systems that occasionally can lead to declination of active emulsion. multitudinous

contaminations arise due to constituents involved in expression piecemeal from the medicine itself. conduct similar as pH revision, in order to modulate solubility of a emulsion, say by acidification, may accelerate its hydrolysis. Water used in expression of results or dormancies, occasionally not only acts a source of contaminations, but may also be involved in generation of newer contaminations by accelerating hydrolysis and catalysis.

Formulation related impurity are classified as

Method related

A given contamination is formed in Diclofenac sodium (parenteral lozenge form) i.e. 1-(2, 6-dichlorophenyl) indolin-2-one during its product. conformation of this contamination depends on pH of expression and condition of sterilization.

Fig 4

Dosage form related

ccasionally dosage form factors impact stability of medicine which forces the companies to recall their products illustration- Due of declination of active component, 0.05 Fluocinonide topical result in 60 ml bottle was recalled in USA. Liquid lozenge forms are more sensitive toward declination. In this regard, pH of result, its water content, material used to construct primary vessel are pivotal factors to be considered. To prognosticate similar degradative eventualities, pre formulation studies are carried out in pharmaceutical companies, including stability and forced declination study, before launching of any product into request. In many cases, rush of crucial component may do due to numerous factors similar as pH, filtering etc. exemplifications- In presence of 5 dextrose in saline result, Imipramine hydrochloride is rained with sodium bisulphite. In granulation of aminopyrine, papaverine, theobromine and salicylic acid tablets, sodium carboxy methyl cellulose causes tablet abrasion. humidity immersion and tablet expansion occurs readily with lactose due to conformation of monohydrate.

Environment related

Some environmental factors can ruin nature of medicine.

Adverse temperature

utmost APIs are sensitive to heate.g. vitamins (folic acid, pantothenic acid, cyanocobala mine and thiamine). They tend to be unstable at advanced temperature and constantly get dehydrated leading to loss of energy especially in liquid phrasings. thus special care should be exercised to help medicines from thermal declination.

Light- UV light

numerous pharmaceutical products come dangerous by exposure of light. Ergometrine and the Methyl ergometrine injection get disgraceful under heating and light. A disquisition revealed that Ergometrine (0.2 mg/ ml) gets fully degraded when kept for 42 hours in direct sun exposure. It's essential to control wavelength and intensity of light and number of photons absorbed by material. For illustration regular sun having about 8000 bottom- candles can destroy nearly 34 of vitamin- B12 in 24 hours (Table 3).

Table 3: Drugs affecting by light/ catalyst.

API/Drug Light/Catalyst

S. No.	API/Drug	Light/Catalyst
1.	Antipyrine	Light
2.	Ofloxacin	Light
3.	Phenothiazine	Light
4.	Epinephrine	Sodium metabisulfite
5.	Penicillin	Sodium bisulfite

Conclusion

Pharmaceutical impurity profiles have recently gained more attention. It is crucial for new drug candidate regulatory filing. Many pharmacopoeias also require impurity profiling and reporting. Impurities must be isolated and characterised in order to gather and assess the information needed to create the biological safety datasheet for new medicinal products. Impurities are frequently isolated and measured using a variety of instrumental techniques. Impurity profiling could therefore be used as a Quality Control technique. It might include important information regarding contaminants that frequently accompany APIs and finished

goods, such as safety, toxicity, detection and quantitation limitations for various organic and inorganic impurities. As a result, the fundamental characteristics of contaminants in drug substances and drug products are the subject of this review study.

Acknowledgement

With lots of respect to my family and my college, I would like to grateful thanks to my college B.C.O.P college of pharmacy for permitting me to do this review article. Special thank to my Friends, respected Teacher's and Coauthors give us lots of information and valuable time, thank for support. I also thankful of international journal of research pharmacy and pharmaceutical sciences, who gives me this opportunity to publish our review article.

Reference

- 1. Singh A, Afreen S, Singh DP, Kumar R. A reveiw on pharmaceutical impurities and their importance. World journal of pharmacy and pharmaceutical sciences, 2017:6(10):1337-1354.
- 2. Misra B, Thakur A, Mahata PP. Pharmaceutical Impurities: A Review. International Journal of Pharmaceutical Chemistry, 2015:5(7):1-5.
- 3. Ahuja S, Alsante KM. Handbook of Isolation and Characterization of Impurities in Pharmaceuticals, Separation Science and Technology, Academic press, 2003, 5.
- 4. Roy J. Pharmaceutical Impurities—a mini review, AAPS PharmSci Tech,2002:3(2):1-8.
- Alsante KM, Hatajik TD, Lohr LL, Sharp TR. Isolation and identification of process related impurities and degradation products from pharmaceutical drug candidates. Part 1. Amer. Pharm. Review,2001:4(1):70-78.
- 6. Satinder A. Handbook of modern pharmaceutical analysis, Academic press info. net, 2001, 298.
- 7. S Gorog A, Lauko B Herényi. Estimation of impurity profiles in drugs and related materials. J. Pharma. Biomed. Ana,1988:6:697-705.
- 8. Muehlen E. Impurities in starting materials and drugs. Pharmazeut. Ind,1992:4:837-41.
- 9. Alsante KM, Hatajik TD. Isolation of process related impurities and degradation products from pharmaceutical drug candidates. Am. Pharm. Rev.,2001:4(10):704.
- 10. Connor KA, Amidon GJ, Stella VG. Chemical stability of pharmaceuticals, A handbook for pharmacists, New York, John Willey & Sons, 1986, 224-332.
- 11. Khushwala P. Organic Impurities in pharmaceuticals. Pharma Info. Net, 2008, 6(4).
- 12. Shah SR, Patel MA, Naik MV, Upadhyay UM. Recent approaches of impurity profiling in pharmaceutical analysis: A Review. Int. J. Pharm. Sci. Res,2012:3(2):3603-17.
- 13. Li L, Guo C, Ai L, Sun H. Degradation of penicillin-G and Penicillin-V in aqueous solution by β -lactamase. World journal of pharmacy and pharmaceutical sciences, 2016:5(2):1478-88.
- 14. Farmer S, Anderson P, Burns P, Velagaleti R. Forced degradation of Ibuprofen in bulk drugs and tablets. Pharm. Technol,2002:28:42.
- 15. Hoerle SL, Evans KD, Snider BG. Determination of impurities, Eastern analytical symposium, 1992, 16-20.

- 16. Patil P, Vaidya I. Overview on impurity. Int. J. Pharm. Res. Scholars, 2013:2(1):54-65.
- 17. Sapra A, Kakkar S, Narisimhan B. Sources of impurities: A Review. Int. Res. J. Pharm, 2012:2(3):57-9.
- 18. Chatwal GR. Pharmaceutical inorganic chemistry. Himalaya, New Delhi, 1991, 1.
- 19. Roy J, Patil P. Pharmaceutical impurities-A mini review. AAPS pharm Sci Tech,2002:3(2):2:1-8.
- 20. Dwivedi AM. Residual solvent analysis in pharmaceuticals. Int. J. Pharma. Excip, 2003, 33-7.
- 21. Pharmacopeia US. US Pharmacopeial Convention. Asian edition, 12601 Twin brook, Rockville, MD,2014:20852:32-39.
- 22. Koji U, Atsuya H, Masayuki G. Matrix media selection for the determination of residual solvents in pharmaceutical by static head space chromatography, J. Chrom. A.,2004:1057:203-10.
- 23. Solanki R. Impurity profile of active pharmaceutical ingredients and finished drug products. Int. J. Res. Tech,2012:2(3):231-38.
- 24. Atici EB, Karlıga B. Identification, synthesis and characterization of process related desfluoro impurity of Ezetimibe and HPLC method validations, J. Pharm. Anal,2015:5(6):356-70.
- 25. Roy J. Diclofenac sodium injection sterilized by autoclave and the occurrence of cyclic reaction and producing the small amount of impurity. J. Pharm. Sci., 2001:34(2):541-44.
- 26. Vijaylaxmi R, Kumaravel S, Anbazhagan S. Scientific approaches for impurity profiling in new pharmaceutical substances and its products-An Overview. Int. J. Pharm. Chem. Sci.,2012:1(1):386-40.
- 27. Buhler V. Vademeeum for vitamin formulation. 2nd revised edition, Stuttgart, Germany; Wiss, Verl-Ges:, 1998.
- 28. Walker GJA, Hogerzeil HV, Hilgreen U. Potency of Ergometrine in tropical countries, Lancet,1998:2(1):393.
- Roy J, Bhuiyan K, Faraque A, Sobahan M, Al Faroique M. Injectable Ergometrine: Stability and packaging for developing countries, Indian drugs, 1997:34(11):634-36.